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THE JOURNAL OF

# Pastoral Care

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# SOME PROBLEMS OF COMMUNICATION IN THE BEDSIDE MINISTRY

REV. JOHN REA THOMAS

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"If we understand the patient's attitude toward us, we can also go a long way in understanding the real meanings of the patient's religious faith or lack of it. Because we represent God and the church, these reactions to us are also indicative of the patient's basic attitude toward God and religious faith."

*An Introductory Approach to the Problems of Communication in the Chaplain-Patient relationship through a study of the meanings of the chaplain's role and religious symbols to the patient.*

EACH of us defines the goal of our ministry to the patient in the light of our individual religious faith, theological training, pastoral background, and life experiences. Regardless of the differences or likenesses of our individual goals with patients, we have one problem in common —the problem of communication. Whether we are trying to communicate an attitude, a feeling toward life and God, an intellectual belief, or an emotional experience, we have the problem of communication. Because communication is no sterile, mechanical process, but a dynamic interaction of two people, then what is communicated depends upon the personality of the chaplain and of the patient, and the interacting relationship.

One main purpose of a Christian bedside ministry to the patient is to communicate, or to mediate, or to make real God's love for that person and the resulting peace of mind and courage of heart which can follow.

As we attempt to communicate at the bedside of the sick person the reality of God's love and care for him, and the strengths and comforts which flow from that awareness, we are reminded again and again of a well-known but frequently overlooked fact. Our very presence at the patient's bedside communicates a somewhat different meaning to each one. We do not always know just what ideas or feelings come to the patient in response to us as chaplain or minister.

### The Chaplain's Role as Seen by Patients

One problem in communication develops at this very point. The chaplain's presence at the bedside of the patient communicates a meaning all its own to him. This meaning may or may not have, on the first visit, any relationship to the personality of the chaplain. Before the patient knows the chaplain at all, he tends to react to the chaplain's presence with an individual meaning or feeling. Those of us who make initial calls in the hospital are impressed with the wide variety of feelings and interpretations which result merely from the chaplain's presence at the bedside. Usually it is the previous religious ministry which the patient has experienced, either at home or in the church, which tends to determine his reactions to the hospital chaplain or visiting clergyman. Unless the chaplain or pastor is aware of this dynamic meaning, he frequently fails in his ministry to the patient.

The following are some of the ways in which the patient tends to react to the chaplain's initial presence at the bedside. The list is suggestive rather than exhaustive in its descriptions.

The chaplain's first visit, often before many words are exchanged, seems to precipitate the patient's resentment or suspicion. These feelings are rarely expressed directly to the chaplain, though such comments as "I'm an atheist," or "God doesn't help me or can't help me," or an attitude of polite indifference on the part of the patient reveal to the thoughtful minister a patient who has negative reactions to authority. The chaplain symbolizes a frustrating, depriving, or rejecting authority in the patient's own life experiences. The patient's reaction is to strike out against authority, and the chaplain and religious symbols stand for a certain kind of authority.

The chaplain represents a similar type of authority to other patients, though here the patient's reaction is different. God is seen as a "cosmic policeman" and somehow the patient feels that the chaplain has come around to check up on his behavior or church attendance. This patient has a submissive though negative reaction to authority. He will assure the chaplain that he is devoted to the church, to Christ, or to the Christian faith. On the other hand, he may make excuses as to why he has

not been a better Christian. The patient either reassures himself or expresses a diffuse sense of guilt. The chaplain is seen as someone who must be pleased or placated, and the way to please the chaplain, and it does, is to talk about religion, one's faith, or one's sins and shortcomings.

Still other patients react to the chaplain as if he were some sort of Santa Claus. They demand his time, his interest, and see to it that he promises to do things for them. By subtle praise or outright flattery, such patients need to get the chaplain to intercede for them with the doctors or nurses, to get him to do small favors or errands, or even to loan money. Occasionally a request for religious literature will serve the same function. Here again the chaplain represents authority. By maneuvering the chaplain into doing things for them these patients are reassured that the chaplain likes them. This tends to make them less apprehensive about their own demanding hostility.

Some patients see the chaplain as a "padre" and he becomes to them a "father," irrespective of denominational nomenclature. Such patients depend upon him emotionally and spiritually. They expect the chaplain to answer all their questions and doubts and to drive away their fears and problems. They succeed, unless the chaplain is alert, in shifting the responsibility for their situation from themselves to the chaplain's shoulders. This is an even more subtle form of flattery, which makes the minister feel important and giving and helpful. Answers are given and responsibilities are assumed by the chaplain. Only later does he realize that new questions arise as soon as the old ones are answered. Sometimes he sees direct evidence that his answers have been used by the patient as a focal point of rejection, and action is taken directly contrary to his suggestion. Sometimes this is done to test the chaplain's genuine interest in the patient.

Other people feel that the chaplain is a holy, i.e., other-worldly individual who does not understand anything about ordinary living. He becomes, in the patient's mind, an "idealist" who knows nothing of the deeper feelings and the "seamier" sides of human living. This is a defensive reaction on the part of the patient, and it usually succeeds in preventing an experience of communication with the chaplain or minister.

Patients whose experience has been related to a sacramental religious faith or to newspaper or movie conceptions of the priest, or those who have hidden desires to die and fears about death, often interpret the chaplain's presence as a sign that they are seriously ill. The presence of the minister precipitates any hidden conflicts in this area and they react quite anxiously. Often the chaplain will not learn of this interpretation of his initial visit until a later call when the patient's anxiety has been reduced.

Still other patients see the chaplain as someone who can, by the exercise of prayer and the sacraments, reestablish the patient's relationship

to God without any effort on the patient's part. Some requests for prayer from such people border on magic.

Another group of patients tend to accept the chaplain as someone who can help them work out a difficult emotional or spiritual problem. They recognize the chaplain's genuine interest in them, his understanding and special skills and training, and so react with friendliness to his presence.

Perhaps this suggestive list of the private meanings which can be aroused in the patient as the chaplain calls by the bedside will help us to understand the various emotional roles into which the chaplain is placed. This reaction to the chaplain occurs before the patient knows the chaplain and thus it is a symbolic one. If such a reaction occurs on follow-up calls, it may be symbolic or it may be a reaction to the chaplain's personality and religious attitudes.

The problem of communication thus involves the patient and his symbolic interpretation of the chaplain's presence. Without becoming more specific concerning the implications of this symbolic relationship, it becomes fairly obvious that the minister or chaplain who is not aware of this dynamic, emotionally-laden attitude will tend to communicate on the level of words rather than on the level of meaningful attitudes and relationships. This will be illustrated later.

One of the reasons why listening is such an important part of the chaplain's ministry becomes evident at this very point. If we do most of the talking, if we try to reassure the patient from the beginning of our visit, we will not understand very much about his attitudes. We will miss the opportunity to recognize this hidden factor in the chaplain-patient relationship, and thus will not be able to use it in a constructive manner. In fact, if we do not listen carefully and with understanding, we will not even be aware that the patient has this symbolic interpretation of our presence, and the preceding pages will have communicated very little to us.

If we understand the patient's attitude toward us, we can also go a long way in understanding the real meanings of his religious faith or lack of it. Because we represent God and the church, these attitudes are also indicative of the patient's basic attitude toward God and religious faith.

A recognition of the symbolic, and of course, the actual nature of the chaplain-patient relationship goes a long way in the prevention of spiritual malpractice. It underscores the fact that no single, overall approach or spiritual remedy or practice can be meaningful to "all sorts and conditions of men."

### Private Meanings of Religious Words and Symbols

In theological seminary, while differences of interpretation are frequent, religious words and symbols come to have a fairly specific meaning to the individual theological student and pastor. We know the mean-

ings which "ought" to be conveyed by their use. When a theological student really seeks to understand the meaning of the Christian faith in the lives of the members of a student charge or when he enters a lengthy course of clinical pastoral training in an institution, he soon learns that the identical religious word or symbol can carry a wide range of meanings for as many people. If he attempts to communicate with the parishioner or patient on the assumption that these words or symbols have the same meaning to the patient that they do to him, he suddenly may discover that while there has been lengthy conversation, little or no communication of feelings or attitudes has taken place.

The following illustrations will demonstrate and underline some of the unusual meanings which standard religious symbols convey to certain people. Let us look at some of the ways these words have been used.

*Prayer* is one word used alike by patients and chaplains. Mrs. Adams had asked me to pray with her and for her at each visit. She was a white-haired, elderly looking lady suffering from a disabling illness. She had a ready smile for the chaplain and welcomed my visits. The fourth time I saw her I began to wonder why she was so eager to ask me to pray for her, especially after she had said that another chaplain had prayed for her that morning. I asked her whether she felt that a minister's prayers were more helpful than her own. She replied that they were. I then asked if she felt a minister's prayers were more influential with God. "Yes," she replied, and paused. I waited. "I don't think God hears my prayers," she went on. I waited again. "It's my temper." Then she waited. I commented that on occasion Jesus expressed strong feelings. Her words and feelings literally tumbled out: "I get so mad at these people in the hospital. They boss me around. I'm not used to having to depend upon others. Always took care of myself." She went on in detail about her resentment toward a nurse who got her to do things which were necessary. Another torrent of feelings poured from this lady and she ended with: "You know, some religious workers were around here and they told me I should turn the other cheek, that I should never get angry. I tried it out for three or four days and things were fine. But one day I couldn't keep it inside any longer, and I really got burned up, and then I felt worse than ever!" After she had worked out some more of these feelings, at the end of this visit she was able to pray for herself. Later on she began to understand some of the reasons for her resentment and was able to believe that God loved her.

What did prayer mean to Mrs. Adams? It is very likely that she felt that God was as angry toward her as she was toward those who were caring for her. Prayer, especially the prayer of a minister, served the function of a compulsive ritual which partially prevented the expression of hostile feelings and reassured her in the presence of her feelings of guilt that God really wasn't angry with her.

With another patient, at her request, I had several prayers on different visits and read passages of Scripture. She was diabetic and had had

one leg removed several years previously. During the hospital stay in question, the other leg had been removed. She said that she wanted to depend upon God and His Love. She was a very sweet-spirited lady, though easily depressed. She spoke of her faith in God in a very intimate way. I accepted both her words and her requests for prayer and readings at face value. The prayers included her desire to be dependent upon God. She developed bed sores and did not recover from them. After her death I talked with one of the doctors who said, "First Dr. W. and then I tried to heal her ulcer, but she wouldn't lie on her stomach. We told her that she had to lie on her stomach to get well. We'd place her on her stomach and the next thing we knew she'd be on her back. There was no reason why she couldn't have gone home several weeks ago, but the ulcer wouldn't heal while she lay on her back. In medical school we didn't see why anyone in this situation should not recover, but here we see why (sic)!"

Prayer to this lady, and being dependent upon God, meant that she could give up responsibility for her present situation and hasten death. Because I failed to recognize this regressive meaning of prayer, I failed to help this woman. I have seen a similar meaning of prayer with other older people.

*Christ* is another word which patients frequently use. On my first visit to a young woman suffering from cancer of the bladder, the woman told me how close she was to Christ, and how much his presence meant to her while she was in pain. I had a brief prayer with her, feeling that this patient had a deep faith sustaining her. The next couple of visits, however, she expressed an odd and yet not uncommon attitude toward the ministry and the chaplain. She was grateful for my visits and my prayers, so I encouraged her to talk about what the minister meant to her. She replied, "He helps you get to heaven." I asked her about her experiences with ministers and she replied with some feeling that her mother was a Methodist evangelist, and had been ever since the patient was a young girl. The mother had passed on to this daughter her own responsibility for the younger children. Later, the mother had publicly humiliated her and said that she had gotten married to get away from home. Her father had become a Baptist minister in his forties, giving up his position as a school teacher in response to a call. I discovered in subsequent calls how little love this girl had received and how guilty she felt about some of her earlier experiences. Just before she died, she said to me, "I believe in you." Christ, for this girl, had become identified with the pious rejecting parents to whom she had both submitted and against whom she had rebelled. Her sickness and the pain, her dependence, her longing for support and love, and the lack of them reactivated these earlier feelings of guilt. Being loyal to Christ meant submitting to unloving parents. Her expression of faith, just before she died, was a tentative acceptance of a different kind of experience with a minister of God. It was an experience with a minister who was interested and who

cared, one who understood her struggles and desires to be loved and accepted. Her expression of faith was a deeper affirmation of the love of Christ than she had ever before experienced.

Another patient, who had gone through the war and had seen buddies on either side killed, made some promises about becoming a Christian. When he came back to this country, he did not live up to his promises and felt guilty about them. Hospitalized for a fracture when hit by a car, he talked with a chaplain about his problem. He felt that God had caused him to get hit so that he would have another chance. It became evident that his mother's standards were very rigid, even for Christian people in his community, and completely at variance with community standards. He wanted to be obedient to his mother, and to her conception of God, and he also wanted to associate with other people in normal recreational activities. He was asked by another religious worker if he believed in Christ as his Saviour. He replied that he did believe in Christ as his Saviour, but that he still felt mixed up inside. Intellectually he believed in Christ, but emotionally such a belief was probably tied up with a submitting to his mother's standards, i.e., remaining a small boy not yet separated from his mother. Growing up, experiencing life for himself, has been identified with sin by his mother, so emotionally submitting to Christ meant further bondage in his own feelings. Religious symbols and his conflict about them hindered the development of a creative relationship to God.

Specific events in Jesus' life have meaning for patients quite different from the interpretations which are current in theological seminaries and writings. One young girl, unloved by parents, and full of resentment directed against herself, interpreted "carrying one's cross" as suffering like Christ. But what did suffering like Christ mean to her? It meant that she should never assert any of her positive, friendly qualities. It meant she should enjoy serving as a door-mat for other people. Suffering was a pleasure in itself! Here Christian religious words and attitudes are interpreted to support the need to suffer. They tended to reinforce the regressive trends in this girls personality. Her self-rejecting attitudes contributed to her poor relationships with people and with God.

Another patient said to a religious worker who had asked him if he were saved: "Religion hasn't kept up with the world. It's no different from what it was two thousand years ago. Science has developed, and other fields of knowledge are growing all the time, but religion is static or stagnant."

Back of these remarks was the following history. His father married his mother because she was pregnant and deserted a few days after the birth of the patient. His mother left him for adoption with her mother at the age of six months. He was raised by the strict, dominating grandmother and the passive, inadequate grandfather. He longed for support from his grandfather but failed to receive it. He married at the age of twenty. Two children were born. After the birth of the second child he

deserted his wife and children, severed all contacts with his mother and worked in another city for fifteen years. Though he was an intelligent, even brilliant man, he failed to realize any of his creative abilities. He had both dependent and hostile attitudes toward God and ministers. After many visits with him, in which he expressed much bitterness, he was able to accept himself as he was with all his failures. When informed of the diagnosis of inoperable cancer, he was able to ask the chaplain to pray with and for him, and was extremely grateful for the prayer. He then was able to contact his children and his mother and was reconciled to his wife just before he died.

This patient both wanted to believe in the goodness and dependability of God and yet had had no human relationships or experiences which could enable him to believe such things about God. His father deserting him, his desires for a father in the person of his grandfather being frustrated, and his mother rejecting him — all these experiences made life a frustrating, depriving, and hostile thing. How could he have any real experience that God loved him and cared for him?

It would be possible to continue with many other examples of the fact that the religious words which a patient uses have individual meanings to the patient which are often at variance with the commonly accepted meanings of such words.

Some will say that these meanings are not "normal." Whatever one calls these meanings, they are those held by the people whom the hospital chaplain sees. Such unusual meanings are not confined to people in institutions. If the chaplain or pastor fails to understand the *personal* meanings underlying the words the patient or parishioner uses, communication of religious insight and truth will be blocked.

# THE USE OF RELIGIOUS ELEMENTS IN MODERN PSYCHOTHERAPY

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FREUD's "Totem and Taboo" (1912–13) and his much later book "The Future of an Illusion" (1929) brought to a culmination an old and severe conflict between different schools of psychotherapy. Originally it was the conflict between those groups of persons concerned with the mentally ill, who saw in supernatural means the only way of salvation of their patients, and those few, who, often denounced as heretical and atheistic, believed in the salvation of the soul by worldly means alone. In the first quarter of our century the position of the supernaturalist approach on the one hand, and the materialistic and atomistic on the other, was considerably weakened, because both schools failed to validate their claims in the light of modern scientific development. In spite of a certain rapprochement, the controversy continued and was carried on between what are called the objective or scientific and the various representatives of modern psychotherapy who do not necessarily feel restrained to use therapeutically religious prescripts or pronouncements to a greater or lesser degree.

It is well known that Freud considered religion as a neurosis originating in the infantile fear of a castration-threatening father. As a rule, the child has no choice but to submit to his father, i.e., he has to give up his incestuous desires toward his mother. In adolescence and adulthood, however, the original fear of and submission to the father reappears in the form of the conscience, the superego, whenever and in whatever fashion sexual desires are revived. In Freud's words "We know that God is a father-substitute, or, more correctly, an exalted father, or yet again, the reproduction of the father as seen and met with in childhood and as mankind saw him in prehistoric times. . . . Later on in life the individual acquired a different, a less exalted impression of him, but the childish image of him was preserved."

Thus to Freud religion was a species of superstition designed to eternalize the fear of a powerful father-figure. Religious experiences could occasionally be valuable, but religion gave man only a delusion of security, which at best could help the patient temporarily, but religion could not be used to restore an emotionally sick individual to essentially normal function for any extended period of time. In short, no substantial

and lasting improvement of a neurosis or psychosis can be expected from a psychotherapy which actively uses religious concepts.

No lengthy discussion of the theoretical and ideological aspects of the aforementioned conflict is here intended. Facts, rather than theoretical considerations (much as their value must be stressed in this connection), are submitted in this article, facts about the psychotherapeutic process, facts which *per se* do not claim to establish the validity of any one approach, facts, however, which shall contribute to clarify the issue at hand. Psychotherapy has long left its ivory tower; its concepts have become familiar to workers in the fields of pastoral care. Its workings, such as dream interpretations and free association method, have also come to the attention of a well informed public. This, however, might be less true for a psychotherapy which does not *a priori* exclude the positive application of religious elements. While it uses generally accepted therapeutic concepts and methods, it naturally deviates in some respects, as will be shown in this article.

The writer has had the opportunity to deal with a number of neurotic and psychotic Jewish patients of adolescent and adult age. Those considered in his study of religious factors in psychotherapy were individuals who had a positive attitude toward Judaism, i.e., they were usually brought up in a religious way (orthodox, conservative, reformed). Above all, they had still an essentially accepting, even if diluted, attitude toward Jewish religion. Practically all seemed to profit greatly from a psychotherapy, which, based on analytical concepts, used religious elements in its course.

The following case (changed in some external facts for the protection of the patient's identity) is presented for its dramatic aspects no less than for the fact that it is quite illustrative of a therapy which uses religious elements. A psychotic rather than a neurotic was selected because the treatment of a psychotic with the usage of religious concepts requires, due to the danger of intensifying religious delusions, an even greater measure of delicate handling than that of the neurotic, yet the therapeutic approach is in many ways similar for most types of emotional disorder.

Dan F. was brought to the clinic by his middle-aged mother for he never would have been willing or able to come on his own. He was twenty-five years old, and an emaciated looking, long-haired, black-bearded young man. In spite of his eccentric appearance, he was rather neatly dressed. A slight limp showed in his gait. Dan was extremely upset during his first appearance; he cried frequently and was unable to express himself coherently. His whiny speech reflected severe anxiety and profound confusion. He scarcely responded to questions but asked many questions which were either irrelevant or too jumbled to be comprehensible. Attempts to induce him to respond in a more rational fashion were unsuccessful. In short, the patient was practically out of contact with reality.

During the following sessions he still had to be brought to the clinic by his mother, the only person whom he — apparently quite reluctantly — permitted to bring him to the therapist. Little by little he was able to give some coherent information about himself. Dan still had no insight regarding the nature of his illness. He hinted vaguely at being very anxious and fearful of certain people and experiences. He also alluded to great and catastrophic events to come in the near future. However, he felt that his behavior was adequate and a justifiable reaction toward evil influences to which he had been exposed lately.

In the meantime Dan's mother stated that her son had behaved strangely for some months. He had become preoccupied with religious ideas rather suddenly. For instance, Dan declared that God had ordered him to pronounce to the world in general, and to the great men of this earth specifically, his gospel of "universal truth and social justice." He spent days and nights writing letters and sending telegrams to important political and religious leaders imploring and requesting them to follow God's words. He even threatened them with sudden and violent death in case they would not follow his advice. Naturally, there had been some police investigations, but, recognizing the obviously disturbed mind of the young man, no action was taken.

Since the beginning of his troubles Dan had never eaten well. During the past weeks he had practically ceased to eat. He had become a soapbox orator who, carrying an American flag and diverse placards with him, was cheerfully exposing himself to the ridicule of his listeners. The mother brought one of the placards which stated in neat block writing in English and Hebrew letters:

GOD'S messenger to the people of New York

> "The mercy of the LORD is from everlasting to everlasting upon them that fear him, and his righteousness into children's children; to such as keep his covenant and to those that remember his commandments to do them." (Psalm 103)

The patient's mother also related the following, much abbreviated biographical information about Dan, much of which was later corroborated by the latter. The patient was born on New York's East Side, the oldest of four children. His mother was then scarcely twenty years old. His father was twenty-seven years old and a poorly paid clerk in an import house. Dan was delivered normally, he had the usual childhood diseases, such as measles and mumps, but there is no history of any severe illness. When Dan was nine years old, he broke his right leg in a ball game, an accident which accounted, according to his mother, for his withdrawal from contacts with other children, and which later made him ineligible for army service.

Dan was always a good and obedient child, he was quiet and shy and generally helpful around the house. In school he was a fairly good student, popular with his teachers who praised his cooperation, less popular

with his co-students who disliked this attitude. Nor was the situation different in the Talmud Tora School. In short, Dan never had a close friend. He was graduated from high school when he was seventeen years old. After graduation he worked as a messenger boy for several firms over a period of time. Four years ago, subsequent to graduation from a private commercial school, he became a bank clerk, a position which he held until recently when the bank felt forced to dismiss him on account of his strange behavior. He was, however, promised reemployment in case his condition should get better. Still, Dan had no friends, nor did he ever care to go out with girls. Here ends his mother's report.

Little by little Dan was able to respond in a more coherent fashion. His anxiety was still intense, his speech rather indistinct, his account of himself often obscure. More and more it became evident that the model child and student had been a disturbed individual since early childhood, who, after the birth of his first sister, had felt himself rejected by a stern and detached father and by a mother who did not respond sufficiently to Dan's affective needs. His main defense against what he perceived to be a hostile environment was retreat from life, not yet an overt break with it, but a shying away from outside contacts, an avoidance of all experiences that could involve him with an unfriendly world — hence the well-behaved child and pet of his teachers.

The dynamics of his schizophrenic development, later confirmed by the psychodiagnostic examination, followed usual patterns. They shall not be discussed here except where necessary for the clinical presentation. One factor was evident at once: Dan's interest in religion, or, rather his intense desire for a God-father relationship. His home itself was not extremely religious. Although his parents had come from Poland, they had brought with them a religious attitude which was scarcely more than a respect for the religious traditions of their parents. Nevertheless, they were quite conscious of being Jews, they occasionally contributed from their meager means to Jewish institutions, they also observed the High Jewish Holidays and Dietary Laws, but they did so half-heartedly and without much conviction. It was respect for the traditions of their parents which induced them to register Dan in a Talmud Tora School at an early age. Dan was by no means a superior Hebrew scholar but he showed early a great interest in Bible stories. When only eleven years old, he showed a strong interest in the Book of Daniel. Dan obviously identified himself via his own name with this great prophet. He eagerly read and swallowed the mystic and often obscure prophecies of the future Empire of the Messiah. No doubt the Book of Daniel had a large share in forming Dan's great delusion of his own messianic mission. However, teen-age Dan was not an extremely religious child. Perhaps on account of his passivity, perhaps because he had not yet fully broken with reality, he did not insist on reforming his family. He became a Bar-Mizvah and fulfilled the traditional religious requirements without overtly showing unusual zeal or conviction.

During the following years Dan showed little change in his religious attitude, but during the same time his family members were somewhat disturbed about his increasing shyness and reticence to talk with people or to join in group activities; occasionally they tried to induce him to give up his seclusive behavior. However, since he did his duty in school and later at work, they felt that nothing could be done about it. Ultimately, they left him alone. Dan, in retrospect, saw himself a lonely youngster devoid of the need for contact with other people, including the members of his own family. In his daydreams he often saw himself as world conqueror or as fighter against the powers of evil. He engaged in masturbation rather frequently, but he denied ever having had any vivid sex fantasies. On the rare occasions when he had the image of a partner he was unable to determine its sex.

The sudden death of his father changed Dan's behavior nearly overnight. As the oldest and only male member of his family, Dan, at the age of nineteen, was expected to take over many duties of which he had been scarcely aware before. He dreaded the role he was supposed to assume. His relations to his father rarely had been friendly ones. In a way, and without being able to give an account of it, he had disliked, even despised his father. Yet he felt himself immersed in a vortex of contradictory feelings. Hate and love, sadness and unexplainable joy about his father's death filled Dan. The confusion of feelings yielded a lasting sensation of dejection. As an empty world became a desolate one, Dan's only refuge became the religious prescripts of his Talmud Tora days, and the fantasies of a messianic mission emerged slowly.

In the meantime the family was in need of a breadwinner. Dan's income as a messenger boy was certainly insufficient, and his two elder sisters, now working, also contributed little to the family income. Dan, on the advice and under the pressure of his family, entered a short-term commercial school and soon after finishing its courses was employed as a bank clerk. His income was still very low but there was the expectation of steady employment and slowly rising income.

Dan was a conscientious and diligent employee. During his first three years with the bank he never missed a day of work. His superiors were highly satisfied with the ever taciturn young man. In the beginning of the fourth year they observed a change in Dan's behavior. The young employee stopped little by little his silent and submissive attitude. He started conversations with a religious content with his co-workers. His bizarre points of view, presented in an authoritative manner, aroused objection and ridicule. Dan felt hurt, but this time he did not retreat. He insisted on the correctness and righteousness of his ideas. His superiors intervened. Ultimately they forbade religious discussions. Dan felt wronged. He started to absent himself from work in order to carry his message to others who would appreciate it. His family too became alarmed. They tried to restrain him, tried to keep him home, reasoned with him — to no avail. Dan felt that everybody was against him. At

that time he sent letters and telegrams to prominent men imploring them to accept his messianic ideas and also threatening them in case they would not do so. The subsequent police investigations only confirmed his belief that the forces of the devil were persecuting him.

At first the therapist just like all other human beings must have appeared a harbinger of evil to the patient. For several sessions Dan was quite unwilling to speak about his past; he was even less willing to talk about what he called a divine revelation. Yet one day he began to speak.

He related that soon after his father's death God had appeared to him and requested Dan to spread his divine message of peace, truth and justice to the people of the world. God also told him to announce His saving grace to those who would follow His message and perdition to those who would ignore it. God, so the patient reported, had also ordered him to live an exemplary life, and to refrain from earthly pleasures. On questioning, Dan stated that God seemed to be an old, white-bearded man, but that he himself was unable to face Him for he had to stand in back of Him.

In revealing his hallucination up to then anxiously hidden, the patient had been able partly to give up his distrust toward the therapist. Dan's still shaky positive attitude toward the latter had soon to undergo its first test. Obviously Dan's disturbed behavior had its origin in his childhood, but his hallucination and its concomitant symptoms were the climax and the expression of a long psychotic development. The goal of therapy was therefore to minimize, if not to abolish, the patient's delusional system. Consequently the therapist had to induce him to give up more and more of his zealously guarded beliefs, yet the therapist had also to maintain and strengthen his positive relationship with the patient. The stern God of Dan's hallucination, obviously the representation of his strict and harsh father, had to be replaced by an accepting father-figure who could alleviate the patient's anxiety and guilt feelings. In short, a severe and rigid conscience, formed in childhood, had to be modified with the therapist's help into one that could tolerate one's own feelings and impulses. This is a hard and time-consuming task and even more formidable if, as in Dan's case, religious elements seem to complicate the delusions. As already indicated, in terms of an orthodox Freudian approach the therapeutic use of religious concepts will increase the patient's delusional system by further supporting his distorted outlook.

Dan's therapist thought otherwise. To facilitate an early and stable positive transference relationship it seemed best to use Dan's long-standing religious background by way of the therapist's sympathetic and understanding acceptance of the patient's religious feelings. Their most important therapeutic use had to be made with a view to help reduce Dan's intense anxiety and guilt feelings and at the same time to modify his delusional beliefs in the direction of a religiously inspired, socially acceptable view of life.

The therapist, therefore, did not ignore or by-pass the essential genuineness of the patient's hallucination. He used it as a springboard in treatment and permitted a lengthy and repeated recital of all details of Dan's meeting with God. After a few sessions the therapist started with a discussion of the restrictions, which, the patient assured, God had imposed on him with respect to food intake and especially with respect to sex life. The question was raised by the therapist whether Dan, a human being with his foibles and frailties, could have fully understood the meaning of God's words. Perhaps, Dan, awe-stricken and shocked by God's sudden apparition, might have overheard or misunderstood something. Before all, the therapist explained, God's requests to Dan were not at all in consonance with His pronouncements as revealed in the Bible. The patient, no doubt influenced by his positive attitude toward a lenient therapist-father-substitute, was therefore especially impressed by a discussion of the meaning of *peruh urevuh* (be fruitful and multiply) from the First Book of Moses. Dan admitted the possibility of having misunderstood God with respect to food and sex continence.

This admission proved to be very encouraging. During the following weeks Dan's overt anxiety diminished considerably. He returned to a normal diet and even spoke of his interest in a young girl in his neighborhood. But while Dan's anxiety receded, he was, nevertheless, still quite restless and beset by guilt feelings. He considered himself a great culprit not so much because of his failure to carry on his missionary crusade but because of those sins which he evasively called "sins of the mind" and which ostensibly referred to homosexual fantasies. It so happened that the High Holydays were approaching when the therapist felt that the patient was ready to take up the problem of human guilt and divine forgiveness. In doing so the therapist continued his role as a lenient God-father-figure, who, with the help of those concepts to which the patient was so devoted, increasingly absolved Dan's conscience from his guilt feelings. A few days before Yom Kippur an especially impressive catharsis took place. In a two hour session the therapist referred to and quoted verbatim those Yom Kippur prayers which contain a confession of man's sins before God and those divine promises to forgive them. The patient, extremely agitated and crying during most of the session, released his "sins of the mind" and found himself considerably relieved in the end.

The session proved to be a decisive turning point in Dan's treatment. He became markedly calmer, and he referred less and less to his hallucination and delusional ideas. The patient soon was able to discuss his reality situation. He acknowledged his duty to return to work and he did so only two months after he had started treatment. While he was essentially able to disown his hallucination, he still referred to it from time to time as a "horrible dream." He maintained his religious attitude, but, instead of being left to himself, he was encouraged to participate in the social and religious affairs of a synagogue in his neighborhood.

Four years later. The patient is still with his bank firm. As a matter of fact, he has been repeatedly promoted on his job. Dan gets along well with his family; he has a girl friend but he has no definite plans to marry her. He is president of the youth division of his congregation and in this capacity he is doing excellent work. Dan still maintains his contact with his therapist by occasional visits. His hallucination is still the "bad dream" of yesterday. No doubt, in some dark recess of his mind he may still harbor delusions of a messianic mission. But what counts is that he is able to adjust himself to reality-requirements and that he finds deep satisfaction in his leadership role in the social and religious activities of his synagogue, a satisfaction which clearly stems from the successful sublimation of his original psychotic desires and delusions.

Our case history has ended. It is by no means complete, for many details and ramifications have had to be omitted. Dan's case is not unique. His rapid and lasting recovery as a consequence of a treatment method, which did not shy away from using religious concepts, is only renewed evidence that religion and psychotherapy are not necessarily antagonistic forces. It is true that fanaticism, anxious and rigid adherence to religious belief or prescripts may betray a disturbed mind which has to be liberated from its delusional shackles. It is also true that the practice of a religious belief does not have to estrange man from reality. On the contrary, by alleviating man's fears and guilt feelings, by accepting him as fellow-man under God, religious ideals offer many a disturbed mind an opportunity to return to reality. Pathological, delusional religiosity must be separated from those religious forces which help man to sublimate his drives, often perceived as dark and dangerous, permitting him to live a life free from unnecessary fears and tensions.

# COUNSELING IN THE AVERAGE PARISH

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PRESENT written material on counseling tends to suffer from two defects for the average parish minister. If it is practical and specific, it is apt to come from the institutional chaplains, psychological clinics, or highly developed counseling programs in large churches, each of which has conditions and issues different from those of the average parish minister. If it is theoretical or theological in emphasis, it often lacks the keenness and soundness of rigorously objectified research data or the practical help offered by clear, concrete demonstration.

As a parish minister serving a small, average, and psychologically unsophisticated congregation, the writer will seek to comment on the questions: (1) Where do you start counseling? (2) What do you do? (3) How do you evaluate your work?

## Where to Start

You *may* start with a counseling program: setting up an office, scheduling hours for interviews, preparing materials inviting people to take advantage of this opportunity. Such a plan often brings a flood of people who want you to do something for them without involving them in any personal change or effort. It often frightens the psychologically unsophisticated away from the minister. Ultimately, it all depends on the people you are serving.

In a very deep sense you always start with the particular people you meet and talk to. A man says, "My wife has become so irritable I cannot live with her. I wish she would talk to you." You may or may not be able to help this man implement his wish, either in deciding how he can bring his wife to see you or in working upon something in himself that might possibly encourage the irritability. Your immediate possibility of helpfulness, however, is to the man to whom you are talking and not the absent wife. You can only help the person with whom you are talking.

A high school boy condemned the Sunday School for being uninspiring and lacking in positive challenge to the ministry. The minister might have rushed to teachers and superintendent calling for an improved program. However, a patient effort to help the boy formulate the foundation of his dissatisfaction led to the boy's sense of unworthiness

coupled with a strong desire to enter the ministry. Understanding and respect encouraged healing of the conflict within him and then the boy himself began a realistic, constructive job in the Sunday School. You can help the boy you are talking with to achieve a constructive attitude, but you can scarcely arrange his whole environment or any part of it exactly to please his present desire.

A young woman felt other people did not respect her maturity. She became engaged but was fearful of telling people because "they just laugh and take it lightly." The minister might have arranged announcements and told people so that they would have taken her seriously. But his understanding of the fear in her problem resulted in her formulating it as a basic fear she had of all relationships. As she finally summarized it, she feared others would not understand, therefore never told them of the development of her attitudes or thinking. The fruit of this inner development broke upon them as a complete surprise. As she clarified the nature of her difficulty in communication, she began to express herself to people. She gained in self confidence as she put her relationships on a more open, direct basis.

The janitor suffering from exacting women, the school principal suffering from community misunderstanding, the Women's Club president suffering from members' indifference, the harried P.T.A. program chairman, the bullied little Nursery School teacher, the psychology student who is sure that he has everything in the Abnormal book, and all the rest we meet during each week: for these, counseling, or precounseling, begins when we can listen, understand, and perhaps help them to see their problem a little more realistically.

Counseling in its more precise or narrower definition begins in a planned interview. When I meet someone who seems particularly confused or suffering at that time, I say something like this: "This seems to be rather upsetting to you. Would you like to come in and talk about it when we can arrange the time to go over it?" If they answer, "Yes," I ask when shall we meet and set a time, which includes both opening and closing. "I can see you from 2 to 3 on Thursday afternoon." Nothing so demonstrates lack of perspective on what we can and cannot do as disregarding time limits agreed on.

Couples planning marriage, a woman wondering about church membership because she has doubts about creeds, a young man referred from another clergyman in order to achieve greater objectivity in the relationship, a student diagnosed as homosexual by his psychology teachers, a handicapped girl nervously facing her first tests in college, a young woman convinced God may require her life, a man tired of his marriage, all indicate they might welcome an invitation for some planned time to sit down and talk with the minister.

Among those people will probably be an increasing number who have been to psychiatrists. They are familiar with the counseling planned interviews. Sometimes they come to the minister because they cannot

accept psychiatric interpretations, sometimes they have been badly handled, sometimes they do not feel understood because the psychiatrist does not understand them when they communicate in religious terminology, and sometimes they will want to go to a psychiatrist but are fearful of him.

The average parish minister's counseling arises naturally out of his ordinary contacts with people in which he demonstrates a capacity to understand. In times of stress he defines the possibility of planned interviews. Others will come to him by referral from the various people he meets in regular contacts.

### What to Do

A parishioner makes an appointment and appears at the study. Fundamentally, it seems to me, you can take one of two attitudes toward him. You may seek to diagnose and evaluate him morally, psychologically, and spiritually. You will then seek information on his background, attempt to interpret deeper meaning from his communication, and probe for revealing material. Or you may seek to help him diagnose and evaluate himself by offering an understanding and clarifying atmosphere. You will then let him deal with such background material as he chooses, recognize and accept the meaning he is ready to communicate, and try to understand the significance of whatever material is chosen by him.

This latter approach, which I regard as pastoral counseling, is illustrated in the following excerpts from electrically recorded interviews with a young woman. She had been ordered by her father to break her engagement and was suffering from repressed hostility and rage. She is speaking of the job which she has taken.

J1: Yeah. The reason I want to do it good is my dad and because I may want to take advantage of the job in another city. I should be out for my own in this, I don't care about the company.

P1: I didn't get the first . . . you want to be on your own?

J2: I mean, I'm strictly out for myself . . . more or less in this proposition. I mean, I'm not going to do my job good because I want to see the company make money.

P2: Your real interest is getting money.

J3: Me. Not the money so much, I guess it's just the satisfaction that I can stick to a job. I'll probably quit in two weeks. But, I guess it's to show my dad.

P3: You really want to prove to him that you got the stuff, huh?

J4: Yeah . . . grown up. I mean, he doesn't believe it. It's funny. I mean, he still thinks I'm an innocent little child.

P4: Really determined you're going to show him you're grown up, if it kills you, huh?

J5: I'll show him at the end of the summer. Or else, he'll . . . I hope. Of course, I don't know, there's a lot of things to keep you sort of clinging home. More than you realize, when it really comes down to leaving everything.

P5: The ambivalence kind of shows up then.

J6: M-hm. It's sort of surprising to me. It has to be . . . it has to be something pretty big, pretty overwhelming . . . for . . . some kids, it isn't, some kids get married, just to get out of the home.

P6: You find yourself with pretty strong ties that would be hard to break.

J7: They are. There . . . I mean, there is always . . . and I know I'm letting myself in for a lot, but . . . I don't think I fully understand how much I'm letting myself in for. I mean, I don't think I fully comprehend . . . I can see it, I know I'm not stepping into anything blindly, yet there'll be . . . no doubt there'll be a lot of times when I'll think of home, I suppose. That's why I want to get away. I mean, get out of the city.
(Discusses both sides of the conflict.)
I think it just makes me realize that it's not going to be a joke.

P7: Really pretty sure it's going to be *plenty* tough.

J8: M-hm, I think so. I mean, as far as making a living is concerned. And giving up what you are so used to.
(Discusses the difficulties, temptations, fears involved.)
I think the more you try to see ahead and more you try to make sure, I mean, the more you realize you can't be sure. And so that . . . that . . . that again is an element of . . . well, sort of afraid. I mean, you can't be sure of something . . . I mean, really, really, really sure.

P8: You need the certainty so much, then you try to get it (J: M-hm) and the more you get it, the more you really realize you never can be certain.

J9: I mean, you can't beforehand. I can rely on my . . . well, myself to make it into a sure thing, but that would be the only thing I would have to bank on . . . would be myself. And another person, too, I mean, you would have to count on them, too.
(Later discusses how mad, tired, disgusted she is with herself as she tries to sell herself.)

J10: . . . *after a while*, I can be pretty good friends with a person, but right away, the other person will have to go out of their way or else I will have to go out of my way and sell myself. I mean, it just doesn't come easy.

P10: Just always have that feeling that really you have to (J: sell myself) sell yourself to them, huh?

J11: Have to do something . . . be overfriendly or exert myself in some way that is unnatural. I feel if I were myself, I won't get anywhere.

P11: Don't feel you could be yourself and have that . . .

J12: Yeah, I guess so. Maybe that's why I don't make very good progress, because I know I'm not myself, but . . . sometimes a person is too busy selling himself to . . . I mean, overlooks the facts that are important. You can be too cautious selling yourself too . . . too cautious and hold yourself back.

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P2: P seems completely lost here. We can scarcely imagine where he got the words; however, sufficient accepting atmosphere has been built up that she correct him.

P3: P seems almost lagging behind her here. He doesn't pick up the doubt whether she can carry through or not.

J3, 4, 5 When P accepts without questioning, indicating doubt, raising questions, or arguing her attitude that she's going to "show" her dad, then she begins to look at opposed and previously denied feelings.

J5, 6 When one half of her attitude is denied, namely, her dependency, all behavior that implements that attitude is "mysterious", "funny", or charged against some other person. Now she begins to see that her difficulty is not simply external (her family) but her feeling of dependency that makes her fearful of breaking with them. She begins to see her own confusion and conflict of desires. When P demonstrates he understands her deeply enough that he is not thinking of an argument against her, she goes on herself to a penetrating understanding of the weaknesses in her present plans.

P8: As P recognizes in her own words the struggle as she sees it, she goes on to face the deeper problems and implications of what she can really depend on.

When J explores the possibility of depending on herself, she then must think of her weaknesses. Here she realizes that her low regard for herself is based more on an artificial front rather than a truer or more complete self which she has not dared to live.

### How to Evaluate

The constructive evaluation of our work proceeds by increasing the number of perspectives we can get on it. Talking the interview over with another minister or counselor will help us to clarify our own attitude which was certainly a major factor in the total situation. Getting better later follow-up written or verbal reports from counselees is another important perspective. Still another is to secure objective data, such as electrically recorded interviews, which can be read over by the minister from a different time-perspective, perhaps several months later. All of these methods have helped me correct the immediate perspective I had in the interview.

Electrical recording has become increasingly available to the average minister. Many of us and our parishioners now have them. The data thus secured offers the most complete, objective data as yet available. Here we can find demonstrated in actual experience the developing attitudes of our counselee, we can discover to what extent our own attitudes seem to have been influential, we get evidence on how real and lasting a new orientation to life may be for our counselee.

Often recording is difficult, threatening, or out of the question. In that case, I believe the minister can discover much about his attitude in counseling by recording some intermediate interview, as, for example, interviewing a Sunday School teacher about how her work is going.

Ultimately, of course, we will evaluate our success in terms of the values we hold dear. However, we are all aware of how our intentions unconsciously go astray in practice. We are still at the level of obtaining more objective data to discover if our behavior implements the values we think we hold. This process can only be carried on by sharing with others some bit of objective data, such as I have done here, and getting their comments on it.

## Conclusion

The average parish minister finds his counseling arising from various continuing relationships in which he has proved himself helpful. Counseling needs some minimum definition to insure realistic sharing of responsibilities, but proceeds on the same principles of understanding, respect, security that characterize any helpful relationship. Objective data from such mediums as recording vastly increase the number of perspectives available to us and therefore help correct our work.

# WHAT CAN RELIGION MEAN TO OUR CHILDREN?

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A FEW days ago a three and a half year old friend of mine asked her mother about God. She wanted to know who God was, where he was, and what He ate. Without waiting for an answer she concluded that He probably "eats trees and sky."

Children ask the most profound questions at times, and as a rule the more profound the question, the more profound is our confusion. Obviously, the subject "What Can Religion Mean To Our Children" is a large one. The most we can hope to accomplish is to point in the direction of some helpful suggestions, not to be regarded as definitive.

In order that we understand one another it would be well to begin by defining some of our terms. Let us first consider the word *religion*. The word is of Latin derivation and means "to bind fast" or "to bind securely." When we remove the words commonly associated with religion — such words as God, Sin, Righteousness, etc. — the original meaning of the word is still most accurate. Religion, as we shall use it here, refers to those basic principles and attitudes to which a person binds himself or finds himself bound, regardless of whether or not he uses the traditional symbols of religion to describe them. Religion is the term used to describe our deepest concerns about ourselves, our fellowmen, our world, our universe, and that which is beyond our knowing — the Infinite, the Ultimate, the Mysterious. Such a definition makes us all religious in a sense. Obviously, then, our religion will inevitably affect our children.

Let us now turn to the words and outward formulations of organized religion. To begin with, we human beings are first, last, and always creatures of *symbol*. We have never been able to give full expression and meaning to our feelings. Civilized as well as primitive man has *always* dramatized, painted, sung, and written about his deepest feelings. From this point of view art and religion are bound up together. But we sometimes have appalling blind spots. Some of us find ballet deeply meaningful, others find it boring. Some of us feel that we understand great classical music, but fail to read the messages found in popular music or simple folk music. Some of us can appreciate poetry, even highly symbolic poetry, but react negatively to the symbols of religion. Yet

*all* of our symbols in both religion and art are born out of the depths of human experience and are actually symbolic and dramatic interpretations of people's feelings about life. The symbols of religion, like those of art, are attempts to express man's deepest feelings about himself, his fellowmen, and his universe. These symbols have in time become quite standardized. The word *God* is a symbol the meaning of which varies from one person to another, and yet practically all people in this country know that it stands for some great power or force. The word *sin* is a symbol the meaning of which varies even more greatly from one person to another, and yet most people know that it refers to activities, in thought or deed, which are not socially approved, or not in harmony with their own or some important person's basic attitude or concern. *The act of kneeling* is symbolic of the attitude of humility, just as in social life men standing when a lady enters the room is symbolic of respect for womanhood. A clear understanding of the meaning of religious symbols is basic either to giving our children religious training, or to teaching them tolerance for the religious training of others.

We have said that religion refers to the deepest concerns of a person. We have added that these concerns have been expressed in symbols, and that the symbols have remained constant for centuries. Let us now ask what people have done with these concerns and with their symbols.

Within our Western culture in recent years there have been two general tendencies regarding the practice of religion and the use of religious symbols. One has been to make the symbols and their interpretations absolute and final. The other tendency is continually to re-define the *meaning* of the traditional symbols when the need for re-evaluation is felt. The same symbols are used but interpreted in accordance with new insight and understanding.

Religion means to our children about as much as it means to us. For those who hold that a given set of religious ideas and symbols are absolute, there is not much of a problem about what religion should mean, for it is already defined in symbol and interpretation. Their problem is much more a matter of method, that is, how these particular religious concerns and symbols can be grafted into the child's life in such a way that they will become an integral part of his whole personality and his living. This is a matter of bringing traditional religion to the child from without, by way of an external authority, which is to be accepted and not questioned.

Those people who are not content to accept any absolute concept of religion have a more difficult task. The writer is among them. We would like to see our deepest concerns developed within children rather than imposed from without. *Our feeling is that until a child experiences in his own life certain concerns and values, the bringing in of a religious symbol or formulation is meaningless.* We first seek to have relationships with our children which will give them the experience; then, we offer them the traditional religious symbol in terms of their own experience.

For example, when it is clear that a child has experienced a feeling of trust and confidence in his relationship with us, then we know that the religious word *faith* can be meaningful to him. Until he is aware of having been able to trust, the word faith can have little meaning for him. When a child feels that his feelings are understood and respected, and that he is accepted as a person for what he is — even when many times, according to adult standards, he has not "deserved" it — he then can understand the word *love* as a religious symbol. The commandment, "Thou shalt love thy neighbor as thyself," will be something he knows about in his own experience, for he has been accepted, loved, and has been treated with respect himself. It is an axiom of modern psychiatry as well as an ancient insight of religion that we respect others only to the extent that we have been respected and have a healthy respect for ourselves. Without the experience first, the symbols of religion can be little more than largely meaningless intellectual concepts, and concepts not based on experience are often sterile and often dangerous. Those who work with juvenile delinquents observe this frequently. Until the delinquent child experienced positive relationships with at least one person, nothing was gained from trying to impose a barren religious symbol upon his mind. But after he had had a significant and meaningful relationship, a religious teaching, ritual, or other symbol could be taught, understood, and *enjoyed.*

There are a large number of parents today who have not been accustomed to using the symbols of religion, and have no desire to teach their children to do so. Their task is even more difficult than those mentioned. It is not difficult to understand why so many people feel this way, for the use of religion has often been negative and constricting — "life-negating rather than life-affirming." Moralism and hopeless perfectionism have conditioned many people against religious symbols. The writer has observed that few if any people in this category have been given the opportunity to understand the difference between deep concern (which in many cases they continue to feel) and the symbol traditionally used to depict this concern. They have never been helped to find new meaning in old symbols. It may be that the sincere and deep values these people hold can survive in their children, or even in history, without the use of symbols, but there is serious question about it. Unfortunately the traditionally religious person has not looked behind his symbols to see what they really mean in life and reality, and the person rejecting religious symbols is usually so emotionally conditioned against them that he finds it extremely difficult to understand how they could be useful or how they could be related to life and reality.

We have, then, three general groups of people. There are those who have frozen their concerns and symbols into absolute and final form to be grafted onto each new generation. There are those who continue to use many of the traditional symbols of religion, but use them only to the extent that they actually have meaning in day-to-day living. There are also those who cannot accept the use of the symbols at all.

There is one other consideration which we should deal with before considering some of the specific questions which parents raise, and it might be a partial answer to parents who wonder whether or not one must have some religious affiliation in order to be religious. It is recognized that people with strong and deep concerns inevitably want to share them with others. First they seek to share them with others who have similar feelings and "talk the same language." With them they find fellowship, encouragement, and an opportunity to work toward a clearer understanding of their shared feelings. Second, they seek to share their concerns with people who are not familiar with them, and who they feel could be helped by them. One of the clearest examples of this today is found among those with psychiatric training. These people usually find their social relationships largely in the company of others who share their deep concerns and findings about man's emotional problems. They are likewise constantly working and organizing in order to offer their findings (their concerns and symbols) to society at large. In the last twenty-five years there has been a veritable revolution in medicine, social work, institutional administration, college curriculum, and even the training of ministers because of the "missionary spirit" of psychiatry. Like others, the psychiatrically trained people themselves have not always agreed, and have divided into many sects, like the Orthodox Freudians, the Adlerians, the Jungians, the Reichians, and the Washington School of Psychiatry.

This is patterned upon what has happened for hundreds of years among people religious in the traditional sense. They have shared similar concerns with others in a fellowship called the *church.* They have sought also to share their beliefs and their symbols with others outside their group. They have disagreed among themselves and divided into sects.

Actually, an amazing number of the deepest concerns of both psychiatry and religion are surprisingly similar if not identical in basic meaning, although frequently different in symbol, the words describing the basic meaning. However, since the concerns of religion include feelings, hopes, and ideas which have to do with the Infinite, the Ultimate, and the Eternal, to this extent they go beyond any others in magnitude of symbol. Very likely this accounts for the fact that through all the tumultuous changes of history the traditional symbols of religion have survived, where other symbols not identified with ancient and timeless concerns have died out. No one would question that there is a great feeling of security in being a part of an organized fellowship which has been able to withstand the tremendous changes of history. This accounts in part for the drawing power of organized religion and for the return of traditional ritual and liturgy to the so-called "free" churches of Protestantism. This need for group relationships is something to consider carefully in regard to our children's needs. The people who gathered around the star of David and the people who gathered around the Cross of Christ were among the strongest rivals those who gathered around the Swastika

in Hitler's Germany had to face. We are creatures of symbol, and the symbols appear to be almost essential to the survival of our deepest concerns — at least from the standpoint of history.

Perhaps now we are ready to consider some of the specific problems which parents are either asking themselves, or are being asked by their neighbors and interested friends about their children and religion. One mother recently stated this problem. "My husband and I belong to no church, and have no religious beliefs or convictions. We're not at all sure what 'God' means. We feel lost and helpless when our little boy asks us, 'What is God? Do we believe in God? Why don't I say my prayers at night like Johnny across the street?' We feel that he is after a certainty that we can't possibly give him, and we can't even seem to find answers to his questions."

A part of the responsibility of parenthood lies in the giving or suggesting of answers. Most of us would agree that parents should answer a child's question as frankly, as simply, and as honestly as possible in a kindly and respectful manner. It would seem that such candor should characterize the parent's response to questions regarding religion. If the parent accepts the absolute interpretations of traditional religious symbols and concerns, he is obliged to teach his child the same thing. We would hope that such a parent would be tolerant enough also to indicate to the child that not all other people share this particular point of view, but that others have a right to their opinions even when they are different from their own.

If parents are confused about who or what God is, an honest answer is better than any other. The parent may say something like this: "Billy, I don't really know who God is. Some people believe that there is some great power which made the world and the stars; they call this power *God*. Other people believe that this great power is very much like a man named Jesus. Others believe he is like a man named Buddha, who lived in India many many years ago. I really don't know who God is, if there is a God. *But it is a good question, and something we often wonder about.*"

Regarding the neighbor's child who says his prayers at night, the parent who has no convictions or theories about prayer might say: "Billy, all people are not alike. Some of us are not sure what prayer is. Some people feel like they do know what it is. Johnny's mother and daddy believe that it is a good thing for Johnny to do at night. Your daddy and I do not say prayers and so we don't expect you to either. People are different, Billy. We do what we feel is best and most helpful, and other people do what they feel is best — even though it may be different from what we do." One might add a general comment like this: "In America we like to let people do what they want to do, and believe what they want to believe, as long as it doesn't bother other people."

Sooner or later children will discover that parents are not omniscient. It would seem that those of us who can accept our limitations gracefully

and admit them on occasion will be more warmly respected and trusted than those who feel that they must appear to have an answer for everything.

For parents who appreciate the use of traditional symbols and who have a real conviction about God, a child's question is a real opportunity to teach a dynamic and creative way of thinking by saying: "Some people believe that there is a great power which created the world, and keeps it running. Your mother and I believe this. We don't understand everything about this power, but we call it *God*." About the act of praying a parent can use the same approach and say something like this. "Mother and I don't understand everything about prayer, but we do like to tell each other how we feel, and what we would like to have happen to us and to you and to other people. Sometimes people call this *feeling of wanting to share*, prayer." Such dealing with children's questions will avoid rigid dogmatism, and will help children understand the difference between reality and the label or symbol we use to describe or enjoy reality. We leave them with open minds, with the feeling that there is more to be learned, and with respect for others who think differently.

Another parent had this problem: "We belong to no church, but the parents of almost all the children in the neighborhood do, and many of their children go to Sunday School. Our little girl feels left out and wants to go. Is it important that she go, since religion means almost nothing to us?"

The parents to whom religion means nothing have the same responsibilities as parents who are firm believers. They owe it to their children to be honest with them about their own feelings. They also should make a real effort to keep the child's attitude tolerant toward the feelings and convictions of others. In most communities people without some religious loyalties and associations are in a definite minority, and like any other minority group their children will on occasion feel they are peculiar because of it. This is a hard fact of reality, and such parents should be willing to pay the price of their convictions. This might involve giving special attention to their own children when their neighborhood playmates are enjoying Sunday School. Certainly it is not good for a child to feel penalized for being different. If the parents do not have outright negative feelings about religion, perhaps they could find a church which comes closer to their attitudes and ideals than any other and enroll the children there. It would be unfair and dishonest to permit the child to attend a Sunday School for which the parents have no genuine respect.

Many parents have no church affiliations but want very much to send their child to Sunday School. They sometimes ask how to find a good Sunday School.

In facing this question we might recall what was said earlier by way of introduction indicating the seriousness and significance of the type of religious instruction a child receives. It would seem that when a parent

wants to send a child to a church school, but has no church connections himself, the parents should do some real reevaluation of their own religious problems, and either find a church in which they too can be active, or become stable enough in their own no-church position to share this attitude with the child, teaching him at the same time to be tolerant of those who do have such connections. However, if this is not done, at least the parents will recognize that the personalities with which the child comes in contact at the church are extremely important. They owe it to the child to be as careful in finding a church as they would be in selecting any other significant associations they wish to make for the child. This will necessarily involve getting acquainted with the teaching staff and methods of any given church. It is altogether possible that such decisions as this communicate to the child the real feelings and attitudes we have toward them and toward life. The child will feel that he is being respected and taken seriously. This, if not overdone, will contribute to strong feelings of security, while if such decisions are handled flippantly they are apt to lead to feelings of not being respected which can result in fear and distrust. This is an example of those little occasions in life when we teach more by example than by what we say.

A father asked, "What do you say when your children ask you whether Bible stories are true or not?"

If we are genuinely interested in giving honest answers to questions about the Bible, there are honest answers available. A staggering amount of work has been done investigating how the Bible came to be. This research is called "historical criticism" and was begun largely in Germany near the middle of the last century. In Germany, however, the results of the research seldom reached the common man, but were fairly well kept inside the walls of the universities and seminaries. In this country the same research has been offered for the layman to read and understand. It is a fascinating study. Three books might be mentioned which any person with a Junior High School education can read easily: *The Bible and The Common Reader*, by Mary Ellen Chase; The *Know Your Bible Series*, by Roy L. Smith; and *The Modern Use of the Bible*, by Harry Emerson Fosdick. These books and others are on almost any book store shelf, and are inexpensive and pleasant reading.

For parents not intending to answer these questions on the basis of even casual reading in the field, it would be best to say something like this: "Mary, some people believe that there really was a great flood which covered all the earth. Other people believe that the story of the flood is more like a legend or a myth." This would be followed by a frank statement of whatever the parents believe.

In many instances it is helpful to indicate the purpose or moral of any given story. An illustration of this might be the familiar story of the Good Samaritan as told by Jesus. We would say: "Jesus made up the story to teach us something important. He wanted to show us that it is good to be interested in other people and to try to help them when we

can. He wanted to show us that sometimes people who are different from us — people of other races, or religions — are often very good people, and often make very good neighbors."

One last problem should be mentioned which is one of the most difficult problems parents have. The word traditionally used to describe this problem is a word which distresses children and parents alike. The word is *sin*. Junior comes running into the house and breathlessly announces that Mary next door has accused him of committing a "sin". He may have tortured an ant or he may have taken off some clothes. Regardless of what has happened Junior has heard a new word, and heard it in such a way that it appeared very important and awful.

One of the Greek words for sin meant "to miss the mark," and was a term used in archery. When a child asks what sin is, this bit of derivative information can be helpful. Sin in this sense is when we don't quite accomplish what we wanted to accomplish, or when we have slipped back into some reaction-pattern which is obviously taking us in the wrong direction. This is the kind of definition some of us in the field of religion today are finding most meaningful. To the extent that the word sin refers to a general tendency in *all of us* to make mistakes, or not always to be at our best, or to be sick or neurotic or even ignorant, to this extent the word can be useful, for it is very much in keeping with reality. Sin in this sense is used to define a general condition rather than a specific act. When a specific act is labeled *sin*, all kinds of guilt-feelings and repressions are almost sure to follow, while recognition of our limitations and mistakes keep us "teachable" and leave the way open for growth.

It is quite unlikely that removing the word sin from our midst would solve the problem we have with it. All children hear the words *good* and *bad*, even in homes and neighborhoods and schools where sin is not used. Even if the words good and bad are eliminated it is certain that the parents' attitude of approval or disapproval will be felt by the child.

Dr. Anton T. Boisen, founder of the Council for Clinical Training, has said that the "good" man is not the man who has attained any particular degree of goodness, but rather the man who is moving in the right direction. By the same token the "bad" man is not the man who has attained any particular degree of badness, but rather is the man who is moving in the wrong direction. He calls this a "dynamic morality" as over against a "static morality." The person with a dynamic interpretation does not get unduly disturbed over the specific acts a child commits, rather his chief concern is the general direction in which the child is growing.

In religion, as in modern psychiatry, sin is often regarded as *sickness*. In both fields there is much written about being *whole*, or as we would be more apt to say today, being healthy. The modern insight of psychiatry, that little can be done for a person until he is aware of his need, is not different from the ancient teaching of religion that a sense of sin must be felt before a person can find abundant life.

These are not easy concepts to convey verbally to children, but they will be conveyed one way or another.

Of one thing, however, we can be sure. Inescapably, religion will mean something to our children. It is up to us to be sure that that meaning will help them.

# THE ESSENTIAL SECRET OF THE MINISTER'S SUCCESS

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THE search for a single essential quality which is the key to the minister's success is, on the face of it, a search for fool's gold. Obviously, there is no one quality which standing alone can produce in the minister a generous influence for good in the lives of his people. As the Apostle suggested, "the good minister of Jesus Christ must be thoroughly furnished unto all good works."

It would be more accurate, and perhaps more rewarding, to sketch a pattern of qualifications essential to an effective ministry. Such a "sketch," however, would turn out like Green's "short" history of the English people — too lengthy to compress into one volume. When the minister is confronted with a comprehensive list of requirements covering his spiritual life, his intellectual acumen, his oratorical ability, his administrative skill, and his practical common sense he begins to feel like Moses and to say, "Who am I that I should bring forth the children of Israel out of Egypt?" Since perfection is unattainable the search for a simple formula goes on, one crying, "Lo, here," and another, "Lo, there."

Some writers, convinced that they have found the touchstone of the whole matter, announce confidently that dramatic skill in the delivery of the sermon is the assured technique for penetrating the defenses of the listener and winning his vote of confidence. We are advised that "Dramatic action draws the people. . . . Did preachers labor to acquire a masterly delivery, places of public instruction would be crowded as places of public diversion are now." The writer of this quick and easy formula would have us imitate the eminent Mr. John B. Gough, "the man that could lecture with his coat-tails . . . his whole being was one animated discourse."[1]

The memories of George Whitefield, Henry Ward Beecher, and William A. Sunday are sufficiently vivid to remind us that there is power, or at least interest, in the dramatic method. It makes for wakefulness in the congregation. Abraham Lincoln confessed that when he listened to a sermon he wanted the preacher to act as if he were fighting bees; and those who listened to John Knox proudly reported that they expected him, at any moment, to pound the pulpit to pieces and fly out

[1] Arthur S. Phelps: *Speaking in Public*, Barton, Cleveland, 1930, p. 205.

of it. Thus, many a listener has probably been thankful for some diversionary action on the part of the preacher to startle him out of his sleep and keep him in the Lord's following. But the number of such listeners is smaller today than it once was. Billy Sunday would not any longer have a receptive hearing at most of our morning services of worship, and it may be reasonably doubted whether Henry Ward Beecher is a good model for the contemporary preacher to copy; there are too many critics in our congregations who would agree with Sinclair Lewis that Beecher was an impressive combination of Saint Augustine, Barnum, and John Barrymore.

The preacher today ought to hesitate before building his hopes upon dramatic techniques interpreted in this way. Suavity and suasion are not sufficient to buy out of purgatory the soul of a preacher whose sermons have nothing to say, even though they say it very well. People of the twentieth century, racked and tormented by the evils of a chaotic time, expect their preachers to shed some light on the predicament of modern man; and a preacher fashioned along the lines of Dickens' character, Mr. Plornish, "a little obscure but conscientiously emphatic," would be a poor watchman to tell us of the night that surrounds our days.

The dramatic technique by itself alone is not the single simple touchstone of the minister's success. There is something more fundamental, and the best interpreters of the dramatic element in preaching have recognized it. In an excellent study, Mr. E. Winston Jones carefully defines the kind of drama appropriate to the sermon, and his description sets forth an ideal more sublime than the techniques of Phineas Barnum or the exercise of fighting bees. The sermon attains dramatic power, Mr. Jones tells us, when it directs its appeal to the feelings and the imagination of the listener and entices him "by a sacred art and courtship" to amend his ways.[2] One may go a step further and say that the success of this courtship, as in any affair of the heart, depends upon the underlying attitude and intent of the suitor. This is the direction in which we ought to look for the essential secret of the preacher's success.

Let us start with the proposition that a minister's basic attitude is more important than any techniques he can develop. This is one of those simple, obvious truths which are as easy to acknowledge as they are to ignore. Yet the analysis of any technique, dramatic, literary, psychological, or homiletical will show, if the analysis is carried far enough, that the preacher's attitude and purpose in the use of the technique are more fundamental than the technique itself. Consider, for example, the relation of attitude to the preacher's fundamental commission to speak the truth of God. The assignment to speak the truth, to serve not as man's man but as God's messenger, is the highest commission, save one, which the minister ever receives. The command to preach the truth is not superseded by any other — except the command of the Apostle to "speak

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[2] E. Winston Jones: *Preaching and the Dramatic Arts*, Macmillan, 1948, p. 22.

the truth *in love*." Now, what does this little six-letter adverbial qualification imply? Is the Apostle here suggesting that even the truth of God, which it is the preacher's first duty to proclaim, will not find its way to the mark nor perform the work of healing unless it be clothed in a suitable attitude? Is he suggesting that without love the truth is impotent and that without love even the lover of truth falls short of the perfection God requires of him? The only safeguard which can save the preacher from becoming the Lord's sheriff, who serves the truth to his people as if it were a warrant freshly issued by the court, is that quality of temperament and character which is as fundamental as the love of truth itself, namely, a right attitude toward persons. A preacher whose sympathies are as narrow as his ideals are high lacks a right attitude, and, lacking that, a love of truth will avail him little and eloquence and virtuosity not at all.

But why labor the point? The minister's basic attitude, since it pervades all that he does and says, will determine the measure of his influence. The main question then is, What shall be the quality of this basic attitude? In what marks of temperament does it reveal itself? The best answer to these questions comes from a recollection of the preaching of Jesus.

Probably the outstanding characteristic of the Master was his disposition to see life through the eyes of other people, especially people who were very unlike himself. His powers of sympathetic identification exceeded those of any other religious leader in his time, or perhaps in any time. John the Baptist saw truth and proclaimed it; but it was Jesus whom the common people heard gladly; it was he who bore their pains in his heart. John spent his time declaiming. Toughened by the heat of the desert and nourished in the wilderness, the Baptist was a solitary man. Jesus, on the testimony of his accusers, was a friend, a friend to sinners. He counted it no offense to lay aside his divinity and enter sympathetically into the privations of common people, or rather, the ability to do this was the mark of his divinity, for where love is God is. An unnamed woman taken in adultery has an immortal place in memory because Jesus identified himself sympathetically with her. An unknown traveler along the Jericho Road is remembered today because Jesus could see his suffering when others could not. A poor widow, unnoticed by anyone else, cast her mite into the Temple treasury and Jesus saw the measure of her sacrifice. The love of the Master was broader than the measure of man's mind. His ability to put himself in the place of others, to suffer with the suffering, to sympathize with sinners, to stand with the outcast and downtrodden, and to win a place of esteem even in the hearts of children are the marks of a temperament in which a love of truth is wedded to a love for persons. This combination of a love for truth and a love for persons is what makes the minister. The love of truth may make a scholar; it requires a love of people to make the minister.

This quality of a sympathetic emotional response to all sorts and conditions of men lays upon the ministry of every age its weighty claim and determines, for good or ill, the effectiveness of the ministerial office. Studies of the preaching situation have shown that influential preaching depends in large part upon a spiritual atmosphere which prevails between the preacher and the congregation, and that the chief factor in the creation of this atmosphere is the preacher himself.[3] The command, therefore, to "put affection into our love of the brotherhood" is not empty advice. The object or effect which the sermon accomplishes in the mind of the listener is determined by whether the sermon has been conceived in love. The sermon may present sacred truth itself, but if it is sent forth in a dictatorial, condescending, detached, or obsequious manner, it will fall with broken wings, because each of these adjectives describes a wrong conception of the preacher's relation to his people; each describes a fault in inter-personal relations. Moreover, the fault proceeds entirely from the character of the minister himself.

The basic cause of failure at this point of sympathetic emotional identification is probably the minister's lack of imagination, which in turn may root in some form of selfishness. Either the minister thinks more highly of himself than he ought to think, or he thinks more grudgingly of his people than he ought to think, or all of his thinking, whether of persons or things, is self-centered thinking. One of the psychological sources of imagination is the ability to transcend one's self and see reality through the experience of another. Thomas Huxley remarked that the only way to know how a crayfish sees is to be a crayfish. The only way for a preacher to know how another person feels is to identify himself sympathetically with the other person.

Dean Willard L. Sperry, in an excellent little monograph on "The Mental Habits of the Minister," suggests that sympathetic imagination is the "power to brood over an actuality until we make it real to ourselves." In the work of a minister there is no substitute for this power. Severity and moral starch certainly cannot serve in the place of it. Severity and moral starch indeed are often the professional signs of a lack of imagination. The minister who is wanting in this power of identification is left to the empty occupation of denouncing the sins of the world, thereby setting up one more contrast between the mind of our profession and the mind of the Master, for "God sent not His Son into the world to condemn the world, but that the world through Him might be saved."

"I should think," writes Dean Sperry, "that a minister could have no better mental and moral preparation for his preaching and pastoral ministry than the deliberate cultivation of the habit of going around the world, looking attentively and sympathetically at all sorts and condi-

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[3] Thomas H. Hughes: *The Psychology of Preaching and Pastoral Work*, Allen & Unwin, Ltd., 1939, p. 134.

tions of his fellow men, and asking, 'I wonder what life looks like to that man, what his problems are, what his compensations for living are, what he wants from religion and has a right to expect from it, and what he is actually getting from religion?' " The imagination with which a minister participates in what he sees is not a faculty which can be developed through the scientific training of the mind alone, because the secret of the matter is not so much what the preacher knows as how he feels. His natural disposition, as Dr. Karen Horney has suggested, may be to move toward people or to move against people or to move away from people. Training of such dispositions is not so much a matter of informing the intellect as it is a matter of educating the emotions. What is needed is a warming of the heart, which may entail a thorough-going analysis of the soul to discover what sordid experiences have rendered the heart cold and the manner inflexible.

Albert E. Wiggam showed how far short formal education falls in reaching the roots of the matter when he reported the fruits of a psychological study of 2,532 persons who were questioned about their social attitudes. The study revealed that the so-called educated persons had more information about social conditions, but that they were no more interested than the uneducated in changing social conditions.[4] If it is the tendency of formal education to produce graduates who have heads but no hearts, then more educators ought to listen to Professor Elton Mayo of the Harvard School of Business Administration when he complains that "students are taught logical and lucid expression; they are not taught that social skill begins in the art of provoking and receiving communications from others."[5]

Can it be that ministers as a class are subject to the same paralyzing indifference, the same lack of emotional concern, the same dull stolidity of imagination as was found to prevail among other members of the educated class? It is worth recalling that the one thing which set Jesus off from his contemporaries was his redemptive love for all mankind. What a commentary upon institutional religion that he alone of all the contemporaries whom we know from the Gospel account should have possessed this priceless treasure; and what a somber warning in the fact that the Scribes and the Pharisees would not tolerate him because he possessed it!

What is the degree of our powers of sympathy? With which company do we travel, with the Pharisees or with the man of Nazareth? What is our attitude toward those beyond the pale, or those with whom we disagree? There is the alcoholic. Is our first impulse to have the law on him, or to see in his extremity God's opportunity? There is the negro. Have we made his suffering our suffering? Or do we, in our anecdotes in

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[4] A. E. Wiggam: "Let's Explore Your Mind," *The Cincinnati Enquirer*, Oct. 3, 1946.

[5] Elton Mayo: *The Social Problems of an Industrial Civilization*, Harvard University Press, 1948, p. 13.

after-dinner speeches, reflect the conventional stereotype and celebrate his alleged incompetence and inferiority? Are we untroubled by living in a town where the only statues of negro characters are those which serve as hitching posts or other ludicrous adornment? There is the pacifist. Are we ready to join with the legion of those who would jail him, or does his exercise of conscience command any respect from us? There is the non-pacifist. Do we read him out of the Christian fraternity on the basis of Matthew 5:39, or do we try to make our peace even with him? The list might be extended to include not only the outcast and the erring, but also sinners in deeper shades of scarlet. Do they inspire us to fix guilt and pass judgment or do we see in them persons who have a psychological right to be the way they are? Can we accept them, as God has accepted us, even when they are unacceptable? "For if ye love them that love you, what reward have ye? Do not even the publicans the same?"

Ministers occasionally take offense at the policies and procedures of consulting psychoanalysts and psychiatrists who sometimes too haughtily boast that they owe no allegiance to any moral standards whatever, but they often perform at least one service for the Lord which some ministers are temperamentally unable to perform. They establish contact with publicans and sinners. This, of course, does not justify antinomianism, but it is a sound warning to those of us who may have forgotten that in order to get anywhere a person must first start from where he is. It is a warning too against the sinful pride which prevents the man of God from accepting the unacceptable person where he is. People in trouble are stand-offish with ministers because they have a suspicion that the minister is unwilling to lower his mind to any difficulty below the highest intellectual or moral level. The late William K. Anderson of the Methodist Church reported that one woman of importance in a community told her pastor, "You are the first preacher we've ever had here whom I didn't dread to have come into the house."[6] The word used in western Pennsylvania to describe those offensive characteristics which make people unapproachable is the word "nobby." A deficiency in emotional warmth first manifests itself in a "nobby" personality, and this deficiency is the forerunner of a condition of pernicious spiritual anemia, which in the case of preachers is always fatal.

The test of a minister's success in any parish is what happens to people under his leadership. His basic principle in preaching, in pastoral work and in education is to come to think first, last, and always of people. The true aim throughout is pastoral, even in preaching, for the goal here is not merely to produce good sermons, but to produce better personalities. It follows then that if this is the test of the minister's success, the secret of passing this test will be discovered in the area of the minister's interpersonal relationships.

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[6] *The Pastor's Journal*, December, 1945.

Every preacher covets, more than anything else, the pure delight of being able to speak the word of God to his people and to be received while doing so. This he rightly regards as the mark of success in his profession and the ground of contentment in his work. Many ministers have been and continue to be effective in their calling — so many, in fact, that one may put it down as certain that success is not beyond reach. Any minister may find the secret if he looks in the right place. Following the example of his Master, he must learn what the love of people truly means in its depth and in its breadth; he must train his imagination to enter sympathetically into their lives; he must prepare his heart to transmit to them the warmth of God's love and mercy. A wise and successful pastor once said, "The pastor never has fulfilled his charge until his own soul meets the soul he would help . . . with all the freedom and confidence of personal intimacy."[7] The prophet Ezekiel gives us the text for our task: "I sat where they sat, and remained there astonished among them seven days. And it came to pass at the end of seven days that the word of the Lord came unto me." When the preacher rises to speak, the word of the Lord will come to him provided he has learned to sit where his people have sat, and always has remained among them.

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[7] Theodore C. Pease: *The Christian Ministry*, Houghton Mifflin and Company, 1894, pp. 36–37.

# EXCESSIVE DRINKING AND ITS RELATIONSHIP TO MARRIAGE

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THE relationship between excessive drinking and the marital association will be considered in terms of a three point thesis.[1] It will be shown first that excessive drinking and particularly characteristics which are usually present in the excessive drinker tend to preclude marriage; second, that married life and excessive drinking are incompatible; and third, that the destruction or disruption of the marital association frequently results in the onset of excessive drinking. Finally, some implications which may prove useful to the marriage counselor will be suggested.

We must differentiate between the ordinary moderate user of alcohol beverages and the excessive or problem drinker. There are in the United States today approximately 65 million adult persons who are users of alcoholic beverages. The vast majority of these are moderate users, who drink because it is customary for them to do so. Whereas these moderate drinkers will, for the most part, stoutly defend their right to drink when they please, alcohol for them presents no particular problem. With the exceptions to be noted below, they control the amount which they drink and if alcohol were to be taken away from them their reaction would be resentment more than a craving for a physical or mental necessity.

Unfortunately, among these 65 million users of alcoholic beverages there are some four million who drink not in moderation but to excess, and for whom drinking constitutes a very serious problem. In speaking of excessive drinking, the intention is not to imply a specific amount which represents excess quantity, but rather that amount which for any particular individual leads to problems such as physical injury, arrest, loss of job, marital discord, or other maladjustments of a social, physiological, or psychological nature.

The four million drinkers who constitute America's problem drinking population are not all alcohol addicts, nor does their drinking stem from

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[1] Selden D. Bacon. "Excessive Drinking and the Institution of the Family" in *Alcohol, Science and Society*. New Haven: Quarterly Journal of Studies on Alcohol, 1945. Lecture 16, pp. 223–238.

any single cause or type of causes but rather from a variety of etiological factors. They have been classified by Haggard[2] into three categories.

About 20 per cent of these problem drinkers are often labeled symptomatic excessive drinkers because their excessive drinking is merely symptomatic of some deeper underlying disturbance such as schizophrenia, manic depressive psychosis, epilepsy, or other psychopathic or physiologic disorders.

Another 25 or 30 per cent of the excessive drinking population can be called social misfit drinkers. These persons are not ill from a medical standpoint but they are socially ill. In this category we find many of the drifters who populate our missions and jails, and others with a low level of intelligence or ambition. They are people who find themselves so limited in their sources of gratification or so alienated from the fast moving society around them that they seek a pleasant form of escape through alcoholic intoxication. These social misfit drinkers do not drink because they are compelled to do so, but rather because they want to. They are perfectly capable of stopping or limiting their consumption but they usually prefer to drink to excess, and as a result they find themselves getting into all sorts of difficulties.

The third category of excessive drinker is the true alcohol addict. He is characterized by the fact that although he may possess a variety of very fine traits which endear him to his family and friends and make him a potentially productive and respected citizen, he is suffering from a compulsion to drink. He is driven by his compulsion to repeated states of inebriation despite the fact that he is fully aware that his drinking is destroying all that he values in life. In addition he can no longer drink moderately. It is said that the alcoholic has no terminal facilities for his drinking, for one or two drinks almost invariably lead to a full-fledged bender. He is in the sad position where, despite his desire to stop, he finds that he cannot alone help himself. His position is further complicated by the fact that his drinking behavior cannot as yet be predicted and thus preventive measures are severely restricted. If it were possible to tell in advance just what characteristics predispose an individual to alcohol addiction, the field of preventive therapy would become well defined. Predisposed persons could be made aware of the impending danger before they become so victimized that they are powerless to change the course of their drinking behavior. Although such predictive factors have not yet been isolated it is possible to describe certain psychological and sociological factors which characterize persons who seem more likely than others to become alcohol addicts. The isolation of identifying physiological factors is the object of considerable research now under way. While prospects of success are promising, the existence of a physiological basis for alcohol addiction has not yet been determined.

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[2] Howard W. Haggard, M.D., Director of the Yale University Laboratory of Applied Physiology and founder of its Section of Alcohol Studies.

In approaching the identification of persons who may become problem drinkers from the psychological viewpoint, it is appropriate to describe an experiment conducted by Massermann[3] in which a group of cats were first taught to associate the presence of food and the act of eating with an electric light and with buttons which they learned to press to produce the light. After the cats had become well conditioned to these processes, the experimenter introduced a complicating factor in the form of an electric shock or an air blast which greeted their button pushing and acted as a block to their enjoyment of food. After repeated punishment and frustration, the cats refused to push the buttons or to eat food in their cages. They even came to associate the painful air-blast so closely with food that they refused to eat under any circumstances. The cats had become what may be called neurotic; they were victims of a conflict — a conflict between a hunger drive and a drive to avoid pain. And this conflict which they could not themselves resolve acted to paralyze their entire behavior pattern. What should have meant a normal pleasant experience had become associated, instead, with a mysterious pain.

Massermann then gave the cats some alcohol by injection and found that when mildly intoxicated the cats would hop around, eat and push light switches. When the effects of the alcohol had worn off they lapsed into their apathetic condition, refused to eat, and the effects of their conflict were again evident. Next, the cats were introduced to milk containing alcohol and they learned to value it to a point where plain milk was completely rejected. As long as they were mildly intoxicated the difficulties of their hunger-pain conflict were not manifested, but when the effects of alcohol were not present they again lapsed into inactivity.

The cats had thus become dependent upon alcohol intoxication; they had become addicted to alcohol; they had come to feel that they needed the alcohol in order to go on facing life. As a final stage of the experiment, the cats were retrained so that the act of eating was no longer associated with an air blast or shock, and when this reconditioning had taken place they reverted to an earlier demonstrated dislike of the alcohol-milk mixture. That is, their conflicts were resolved and they were rehabilitated from their alcohol addiction.

With certain elaboration and refinement, this is the story of why men and women become addicted to alcohol too.

Like the frustrated cats, human beings today find themselves in a highly complicated society. Life is competitive and impersonal. Mistakes are easy, and everyone makes his share. There is keen competition with respect to employment, sexual satisfaction, social position and prestige. In everyone, mistakes and wounds suffered in social living produce a certain amount of anxiety, tension, frustration, and guilt. Yet, despite these difficulties most people manage to make a fairly satisfactory working compromise with life.

Certain individuals, however, are not so fortunate. For them, these anxieties, tensions, frustrations, and guilt feelings are like the blast from the air hose or the electric shock to Massermann's cats. Whenever they

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[3] E. M. Jellinek. *Alcohol, Cats and People* (Pamphlet) New Haven: Publications Division of the Yale Plan on Alcoholism, 1948.

try to satisfy ordinary needs, they feel pain. Some of these people suffer from unreasonable frustrations in every sort of situation. At home, at work, in schools, in the church, these individuals are constantly suffering tension, embarrassment, and distress. Some of them try to hide their distraught condition, others are unaware that anything particular is wrong. They just know that life is one painful experience after another, and that they seem to live in constant friction with the world. These people are maladjusted; like the frustrated cats who couldn't resolve their conflicts between hunger and pain, these people are neurotic.[4]

To avoid the charge of oversimplification in comparing neurotic humans with cats in which a neurosis-producing conflict is conditioned by laboratory experiment, it should be pointed out that cats, of course, have no means of realizing their problem or of making an intellectual or an emotional effort to adjust their difficulties. Likewise, recourse to alcohol for the cats does not involve family, marital, employment, legal, or other difficulties.

However, just as the neurotic cats were conditioned to associate their basic need of hunger with pain, so neurotic human beings associate with pain such essential human needs as companionship, associating with others, giving and receiving affection and many more.

Since alcohol is basically a depressant and an anesthesia, its immediate effects on the human organism are to relieve anxieties and fears, and to alleviate the pains of tension and conflict. It also acts to depress inhibitions of certain forms of socially disapproved behavior, thus allowing the individual to release his pentup aggressions or repressed desires. For the neurotic individual who fears associations with other people — who detaches himself from society — alcohol can be used as a means of either reinforcing this detachment (that is, without alcohol he is lonely and needs people, but with it he can afford to become morose and solitary) or it can help him to break through this detachment (that is, it depresses his inhibitions against associating with others and allows him to mingle freely without feeling the pains of anxiety.) Alcohol may also provide temporary solutions for conflict by repressing one of the conflicting elements. For the neurotic who feels the need for self-aggrandizement, alcohol allows him to act the part of his self image. No difficulty is insurmountable for him. He makes great claims on society and on himself; he feels that he is entitled to anything he asks. It is behavior such as this which tends to make the alcoholic and his demands almost impossible for others to live with. They also make it hard for him to live with himself, for since his impossible demands cannot be met, he constantly feels that he is abused, hurt, disappointed, and indignant. He goes around with a tremendous feeling of hostility and resentment. Without alcohol he cannot express these hostilities because of his need

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[4] Isidore Portnoy, M.D. *Psychology of Alcoholism* (Lecture reprint). New York: Auxiliary Council to the Association for the Advancement of Psychoanalysis, 1947.

for love and affection from others. When under the influence, however, he need no longer repress them.

At this point it should be stressed that neurosis is itself merely a matter of degree. We live in a highly complex society in which all individuals are faced with a wide variety of conflicting situations at all times. The neurotic is the person who more than others finds it difficult to resolve these conflicts and who in his attempts to do so hits upon pseudo-solutions which in themselves serve merely to increase the neurotic anxieties and pain. Of course, not all neurotic persons become alcoholics, but it can be said that it is very unlikely that the well-balanced, well-integrated personality will become a compulsive drinker, while it is not unlikely that the individual who suffers from deep neurotic conflict and anxiety may, upon the introduction of alcohol, find in it one of those pseudo-solutions which in the end can have no other effect than to increase his neurotic pain.

Turning now to a sociological consideration, a broad categorization which fits most alcoholics is that of undersocialization. Undersocialization can be defined[5] as a syndrome which includes a wide variety of atypical conditions and relationships with normal society. Usually undersocialization is the result of a failure to adjust to normal social ways and this, in turn, is frequently the result of a deficient process of socialization. The concept, socialization, describes the conditioning of the individual to the ways of society, including expected or desirable behavior and social taboos and prohibitions — in other words, the ways of getting along with people and of sharing social experiences. Deficiently socialized persons or desocialized persons are usually deprived of the opportunity of sharing experiences with others, of belonging to social groups and participating in social activities. They are also deprived of such important personal needs as affection, prestige, the feeling of security, and the rewarding aspects of identifying with others. The satisfaction of these needs is usually achieved only through association with other people. Because they have not learned the ways of society, undersocialized persons are insecure, and acts of sharing become distasteful, difficult and even dangerous for them. For this reason they often seek to avoid such associations as are normally found in the family, in schools, in employment situations, in church participation, and in community life.

Thus, going hand in hand with neurotic anxieties, we find that the alcoholic, either preceding or directly resulting from his alcoholic condition, is a person who is isolated from the normal channels of social intercourse. People who are deficient in their learned ways of getting along with others or who forget some of these techniques appear more

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[5] Robert Straus. "Some Sociological Concomitants of Excessive Drinking as Revealed in the Life History of an Itinerant Inebriate." *Quarterly Journal of Studies on Alcohol*, 9: 1–52, June 1948.

apt to become alcoholics than individuals who are well integrated in their social environment.

It should be stressed at this point that neurotic conflict and undersocialization are by no means isolated entities. As a matter of fact, one would never expect to find one condition present without some degree of the other. On the one hand, the insecurity, the fears and anxieties which accompany neurosis tend to preclude normal social relationships, thus isolating the individual from institutional participation. On the other hand, the individual who has never learned or has forgotten the techniques for sharing social experiences, getting along with others, giving and receiving affection and the like, will be faced with severe anxieties over his inadequacy for meeting social situations in ways which will be socially acceptable.

Now that we have outlined certain broad characteristics for persons who can be said to be more likely than others to become alcohol addicts, we are ready to consider these in the light of the contemporary status of the institution of marriage in America.

During the last century the function of the marital institution has undergone revolutionary change with development of a more specialized society. Economic, governmental, educational, religious and recreational institutions have all expanded greatly with the assumption of functions formerly assigned to the family. Accompanying specialization, there has been a growing tendency toward impersonalization in all of these institutions except the family. The result has been that a primary function of the American family has come to be the satisfaction of such personality needs of the individual members as affection, prestige, self-respect, and sexual expression.[6] The family is also the seat of personality development and socialization. Thus the individual who comes from the parental family bearing characteristics of neurotic personality or social isolation which make him prone to become an excessive drinker is likewise ill equipped for the sharing of interpersonal relationships and the close reciprocal intimacies demanded in the marital family.

We can now consider the three-point thesis mentioned at the beginning of this paper. Point one of the thesis suggested that the same characteristics which make the individual prone to excessive drinking also tend to preclude marriage. Point two suggested that these characteristics are incompatible with the marriage association.

Two general characteristics of the excessive drinker, neurotic anxiety and undersocialization, have been described. To the neurotic, undersocialized individual whose psychological and sociological maladjustments may manifest themselves in a variety of emotional and behavioral instabilities and abnormalities the association of marriage with its severe demands on intimate, reciprocal personal relationships and on the

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[6] Bacon. "Excessive Drinking and the Institution of the Family."

sharing of emotional and social needs and gratifications seems most forboding, repulsive and even dangerous. He is poorly equipped on both the psychological and the social level for acts of sharing and for participation in group experiences. As a result, he will carefully avoid any or all situations which demand such sharing. He will particularly avoid marriage, and if he should marry, the marital association with its uncompromising demands for giving of the self will most likely prove so intolerable to him that, consciously or unconsciously, he will seek its dissolution. Hostility toward the incompatibilities of marriage may even result in the excessive use of alcohol as an expression of aggression toward the uncomfortable state of marriage or toward the marital partner whom he probably will blame for his condition.

The considerations just suggested can now be subjected to empirical examination by considering data dealing with marital status taken from two studies[7, 8] which have been made of two categories of excessive drinkers and expectancy data for comparable groups of the general population.[9]

Table 1 indicates by percentage distribution the observed marital status of a group of 1,223 arrested inebriates and the expected distribution for comparable members of the general population.

Table 1. Marital Status of 1,223 Arrested Inebriates

| *Observed* (%) | | *Expectancy* (%) |
|---|---|---|
| 53.1 | Single | 19.6 |
| 22.9 | Married | 71.9 |
| 11.5 | Separated | 3.5 |
| 7.5 | Divorced | 1.2 |
| 5.0 | Widowed | 3.8 |

Here it is seen that while 80 per cent of the general population group had married, only 47 per cent of the arrested inebriates had ever entered into a marital relationship; while 72 per cent of the general population group were still married and living with their wives, only 23 per cent of the inebriates had kept their marriages intact. In table 2 similar comparisons are made between a group of 203 homeless men, of whom 177 were excessive drinkers, and a comparable general population group.

Here the discrepancies are even sharper than those for the arrested inebriates. Fifty-five per cent of the homeless men had remained single as compared with an expectancy of 15 per cent. As might be suspected,

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[7] Bacon. "Inebriety, Social Integration and Marriage." *Quarterly Journal of Studies on Alcohol*, 1945.

[8] Straus. "Alcohol and the Homeless Man." *Quarterly Journal of Studies on Alcohol*, 7: 360–404, December, 1946.

[9] In each instance census data on males from the general population were adjusted to provide control groups of comparable age distribution.

only one man in the homeless group had a marriage which could still be called intact as compared with a normal expectancy of 75 per cent.

Table 2. Marital Status of 203 Itinerants*

| *Observed* (%) | | *Expectancy* (%) |
|---|---|---|
| 55.6 | Single | 15.0 |
| 0.5 | Married | 74.9 |
| 16.8 | Separated | 3.9 |
| 13.8 | Divorced | 1.0 |
| 13.3 | Widowed | 5.2 |

* Seven of the men were reported as non-users of alcoholic beverages, 17 as moderate users, the drinking habits of 2 were unknown, and the remaining 177 were classified as excessive drinkers.

Tables 3 and 4 indicate comparative percentage of distributions of marital status for only those men in each group who had ever been married.

Table 3. Present Marital Status of 574 Arrested Inebriates Who Had Married

| *Observed* (%) | | *Expectancy* (%) |
|---|---|---|
| 48.8 | Married | 89.4 |
| 24.6 | Separated | 4.4 |
| 16.0 | Divorced | 1.4 |
| 10.6 | Widowed | 4.8 |

Table 4. Present Marital Status of 90 Homeless Men Who Had Married

| *Observed* (%) | | *Expectancy* (%) |
|---|---|---|
| 1.1 | Married | 88.0 |
| 37.8 | Separated | 4.6 |
| 31.1 | Divorced | 1.2 |
| 30.0 | Widowed | 6.2 |

Here the factor of marital incompatibility comes into sharper focus. It is seen that the arrested inebriates were divorced 12 times and separated 6 times as often as expected, while the homeless men were divorced 25 times and separated 8 times as often as expected.

An additional phenomenon demonstrated by these data is not related to the preclusion of marriage or incompatibility in marriage but rather to the third part of our introductory thesis (e.g., that disruption or destruction of the marital association frequently results in the onset of excessive drinking). It is seen in table 3 and 4 that the drinking groups exceed the expectancy in incidence of widowhood by ratios of over 2 to 1 for the arrested inebriates and of nearly 5 to 1 for the homeless men.

In seeking an explanation for this relationship, we must again consider the function of the marital association in fulfilling intimate personal needs. Life outside the family has in many instances become so impersonal that there are many marriages in which the partners, particularly those who are not too emotionally stable to begin with, become abnormally dependent upon each other for emotional security, and for stimulation and cues to behavior. Such persons develop few interests outside the home and lose touch with techniques for making or gaining gratification from associational ties. Upon the sudden death of or sudden separation from the partner around whom the whole life pattern has become centered, the survivor finds himself disoriented and isolated both socially and emotionally at a time in life when there are few opportunities and incentives for forming new interpersonal relationships and group associations. Life imposes a meaningless and drab existence for such an individual, and should he be introduced to alcohol, the chances are not remote that he would find it a gratifying form of obliteration or a helpful crutch.

In conclusion I would like to suggest an implication contained in the thesis and the characteristics which have just been described. It is an important implication not only for the marriage counselor and for all others concerned with the conservation of marriage and the family but also for the public at large, since public opinion frequently plays an important part in the eventual interpretation and disposition of such situations.

It is a human failing in approaching problem situations of all kinds to think in terms of single cause and effect relationships which lead to hasty deductions concerning etiology. In the analysis of situations in which marital discord and excessive drinking both appear, there is and has been a great tendency to concentrate attention on determining whether the excessive drinker became addicted to alcohol as a result of an unbearable marital situation or whether the marital relationship has "gone on the rocks" because of excessive drinking by one of the partners, and to blame one situation on the other.

Excessive drinking is a spectacular factor of behavior; it is not easily concealed and it is not infrequently present along with marital discord. We have tried to show that whereas one condition may intensify the other, excessive drinking and marital incompatibility are in reality both manifestations of the same type of underlying psychological and sociological abnormality. The widower who becomes an alcoholic appears on the surface to have turned to excessive drinking as a means of burying his sorrow, when in reality his drinking is more likely to be a form of pseudo-adjustment to a situation caused by an emotional overdependence on his late wife for which he can find no substitute through available, socially accepted channels of behavior. The bachelorhood of the excessive drinker who never married may well be blamed on his drinking and the fact that "No decent girl would want him," whereas if the truth were known many

fine girls may have longed for a chance to marry him (each thinking, of course, that she could reform him). He, on the other hand, may have avoided matrimony for the very same underlying reasons that he drinks to excess. In a similar vein the larger number of divorces and separations which are attributed to excessive drinking are no more the result of this single cause than the problem drinking of many married persons is the result of incompatibility with the marital partner. In each case one must look to refined levels of behavior and realize that the relationship of excessive drinking to problems of marital association is almost invariably one of multiple joint causation and most rarely one of direct cause and effect.

STATEMENT OF THE OWNERSHIP, MANAGEMENT, CIRCULATION, ETC., REQUIRED BY THE ACT OF CONGRESS OF AUGUST 24, 1912, AS AMENDED BY THE ACTS OF MARCH 3, 1933, AND JULY 2, 1946, OF *THE JOURNAL OF PASTORAL CARE*, PUBLISHED QUARTERLY AT BOSTON, MASSACHUSETTS, FOR OCTOBER 1, 1950.

State of Massachusetts
County of Middlesex

1. That the names and addresses of the publisher, editor, managing editor, and business manager are: Publisher—Council for Clinical Training, Inc., 2 East 103rd Street, New York 29, New York; Editor—The Rev. E. E. Bruder, St. Elizabeth's Hospital, Washington 20, D. C.; Managing Editor—the Rev. John R. Baker, Andover Hall, Cambridge 38, Massachusetts; Business Manager—the Rev. Frederick C. Kuether, 2 East 103rd Street, New York 29, New York.

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Sworn to and subscribed before me this 27th day of October, 1950.

MARY E. SPOFFORD

My commission expires March 50, 1951.

# BOOK REVIEWS

***Dianetics: The Modern Science of Mental Health:*** L. Ron Hubbard; Hermitage Press, 1950. 452 pp. $4.00.

"Dianetics is an adventure," reads the foreword to this book. It may be that, but it is also an amazing combination of a few sound principles of mental health with many others we can only call fantastic hogwash. The book professes to be the one needed guide to mental health by every one including the psychotic patient. Anyone can be another's therapist or "auditor" — just follow the book.

Since its publication in the spring of 1950, the volume has climbed steadily up the non-fiction best-seller lists, and is being read and solemnly tried by multitudes of people — apparently in much the same way they might try other panaceas of diet or prayer or memory training.

Arbitrarily separating the basic principle which is sound from all the nonsense (something the author does not do) we find this: our psychic difficulties arise from a failure to assimilate elements of our actual experience, and procedures which aid such assimilation will lead us in the direction of health.

This generally accepted point, however, is placed in a context which is unbelievably mechanistic, depersonalized, and neologistic. The key concept is the "engram," the "recording" of painful experience which is considered to be "cellular" in character. These pile up into an "engram bank," and perhaps there is unconscious humor in having this bank tapped only by an "auditor."

No reader of this journal could possibly take the book seriously. Yet he is likely to find many people in his congregation doing just that. An hour or two in the atmosphere of this astral dogmatism may therefore prove useful to the pastor (if he has the good sense not to boost sales by buying it, and not taking the time to read it through).

Its lure must lie partly in its fantastic claims and partly in the very mechanistic and depersonalized approach to those who feel as automatons. As a symptom of our times, this book is sobering.

SEWARD HILTNER

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***The Counseling Interview:*** Clifford E. Erickson; Prentice-Hall, 1950. 174 pp. $2.35.

Written by the head of the counseling program at Michigan State University, this volume seems to be intended chiefly for people in the public schools. It aims at being an A-B-C book, literally as well as figuratively, for three of its pages are devoted to "Some A B C's of Interviewing," starting as follows: "*A*rrange the office so that there is an atmosphere of comfort . . . *B*e friendly . . . *C*ast aside unfinished business . . ."

Everything is presented in lists. For instance, under a chapter on "The Nature of Problems," sub-heading "Frustration and Behavior," there are five

sub-sub-headings of types of behavioral reaction to frustration, of which sub-sub-heading number 5 is on "Partial solutions or compromises," which in turn contains twelve sub-sub-sub-headings, averaging two lines each on dissociation, negativism, repression, etc. The whole frustration section is dealt with in only two pages!

The point of view attempts to be eclectic. Rogers and May, for example, are both commended as being relevant in some respects, but both are damned with the faint praise that they exhibit a point of view. The good interviewer, it would appear, solemnly examines all points of view for the purpose of emerging without a point of view. He remains friendly, warm, permissive, encouraging, observant, supportive, artistic, flexible but a kind of point-of-viewless neutral.

This book is not quackery, and one finds it difficult to discover single statements which, when properly interpreted, might not have real meaning, e.g., "Encourage counselee to carry his own responsibility for his problems." But when the obvious implications of this and many other statements would necessitate reinterpretation of other points, and yet no implications are drawn, one can only conclude that the author's own intellectual apparatus is in arrears, or that he has a secret contempt for the non-experts for whom he writes.

From the first sentence to the last, the book is "written down" to its readers. One shudders to think that there may be interviewers in the public school system whose uncoordinated and conflicting ideas of what they are about were garnered from the lists in this book. It is the kind of volume which, if not evaluated critically and immediately, can unconsciously help to sabotage the entire guidance movement in the schools.

SEWARD HILTNER

●

***Renewing the Mind:*** Roger Hazelton; Macmillan, New York, 1947. 192pp. $2.50.

In seeking to answer the question, "How can you be intelligent and a Christian too?" the author gives a decisive analysis of the relationship between faith and reason. In reply to the cult of irrationalism which holds faith apart from reason he shows convincingly how the two must be as right and left hand to each other. Faith, if vitally concerned with reality, is a passionate seeking for understanding. Such vitality Hazleton demonstrates in the moving and vivid character of his thinking on this subject.

The contemporary mind is acutely ill, and one symptom of its illness is the extent to which we have lost the power of sustained and searching thought. If the teacher or pastor is to be a good physician of the mind he will not prescribe platitudes and placebos, but will do rigorous thinking in search of deeper and more faithful understanding of God and man. He will do this not as one who stands apart like the elder brother to condemn the prodigal without entering into the father's love for him but rather as one who suffers with him in the excruciating disillusionments of power-hungry egotism and finds a renewing of the mind in devotion to truth with compassionate and unfailing love.

PAUL E. JOHNSON

***Ye Shall Be Comforted:*** William F. Rogers; Westminster, Philadelphia, 1950. 89 pp. $1.50.

This is the second of the Pastoral Aid series being issued by the publisher with the editorial direction of Russell L. Dicks. The author is a Congregational minister who made a special study of bereavement in the process of securing a doctorate from Boston University.

The book is divided into two sections. The first deals with the dynamics of grief, how others can help, and religious resources. The second part consists of selected Biblical passages, appropriate prayers, and "inspired thoughts" — quotations from prose and poetry.

Dr. Rogers is to be congratulated for sharing such exceptionally relevant, empirically sound, and sympathetic wisdom. It is the only reliable, realistic, and non-maudlin book on the subject known to this reviewer. Every rabbi, priest, and minister should read it carefully and thoughtfully.

The second section is disappointing in places. It is difficult to choose passages acceptable to all. Grieving parents will find remarkable understanding in Canon Elliott's description of his feeling over the loss of his little son, Robin. It is written with extraordinary sensitivity and simplicity.

ROLLIN J. FAIRBANKS

●

***Personal Adjustment in Old Age:*** Ruth Shonle Cavan, Ernest W. Burgess, Robert J. Havighurst, and Herbert Goldhammer; Science Research Associates, Chicago, 1949. 204 pp. $2.95.

Addressed primarily to research workers, professional workers with the aged, and students in courses which consider the status of older people in our society, this book advances the work set up by the Committee on Aging of the Social Science Research Council so that it is a sequel to *Social Adjustment in Old Age* by Otto Pollak and a companion volume. It gives a further clarification of the problem, presents new data gathered from a survey of nearly three thousand older people, and describes the instruments constructed and validated in gathering this data. This volume is basic for any one working seriously in the field of services to older people. One would hope this category will include an increasingly large group of ministers who supplement their understanding of persons derived from their own experience by keeping up with the basic studies made by the various sciences of man.

PAUL B. MAVES

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***Sex in Social Life:*** Edited by Sybil Neville-Rolfe; Norton, 1950. 504 pp. $5.00.

Cyril Norwood of St. John's College, Oxford, states in the Foreword, "under the misuse of hunger lies ill-health, under the misuse of thirst drunkenness, under both, death. And so it is with the misuse of sex, and yet it can be the finest thing in life; this book is meant to show how."

Fifteen English scholars contributed the chapters which form this book. The writers represent wide professional training and experience. They write clearly, frankly, and frequently with considerable subtle English humor.

The book deals with the biology, physiology, psychology, and sociology of sex. The authors seek to offer the facts of sexuality from the love life of the amoeba to the relation of sex to culture and history. In general, they uphold the conventional mores but urge wiser sex education beginning with the cradle and fulfilled in the mastery of the "art of love" in sexual intercourse. Many helpful suggestions are offered by apparently well qualified specialists regarding what to say and how to deal with children of all ages. Unfortunately, the one chapter written by a minister is a bit chatty and hardly as stimulating as it might have been from the religious point of view.

The psychiatric orientation of several of the authors is heavily Freudian and in some instances quite dogmatic. There is some tendency to regard sexual behaviour as a cause of good or bad interpersonal relationships rather than a symptom of them.

The book is worth owning and would be a valuable reference work for a minister's library, but does not offer much new or unique insight.

DON C. SHAW

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***Fertility in Marriage:*** Louis Portnoy, M.D. and Jules Saltman; Farrar and Straus, New York. 250 pp. $3.00.

This book is advertised as "A Guide For The Childless" and goes into the subject of fertility and sterility in great detail. It expounds the causes of sterility in men and women, the various tests used in making the diagnosis, the treatments that can be given, and contains chapters on adoption and test-tube babies. The appendix gives a list of the clinics all over the United States where treatment for sterility may be obtained, and also a list of adoption agencies in every state.

Whether such a detailed book should be directed to the lay public is a moot question. It certainly offers an abundance of authoritative material, although this reviewer disagrees with the author's apparent endorsement of artificial insemination.

G. DOUGLAS KRUMBHAAR, M.D.

●

***Children With Mental and Physical Handicaps:*** J. E. Wallace Wallin, Ph.D.; Prentice-Hall, New York, 1949. 549 pp.

The career of J. E. Wallace Wallin spans a period of forty years in the history of clinical psychology and special education in America. Calling on this vast experience the author set for himself the goal of writing a reference book which would serve the lay reader as well as the professional worker. It is a high compliment to the author that he has largely succeeded in achieving this goal. It is possible for the technical expert to find much of value in the book at the same time that the relatively unsophisticated reader is not frustrated by unfamiliar technical jargon. This is not meant to indicate that the book is a popular work. It is not. It is a reference work, as the author points out. On the other hand, in most instances he has been careful to define or explain the technical terminology which he does use.

The exposition is detailed and comprehensive. About 60 per cent of the text is devoted to mental deficiency and its many manifestations. Orthopedic handicaps, particularly cerebral palsy and poliomyelitis, represent about 15 per cent. The remaining 17 per cent concerns itself with endocrinological, biochemical and metabolic disturbances, encephalitis, syphilitic brain defects and other neurological disorders. Excluded by design are mentally subnormal speech defects, handicaps in the fields of vision and hearing, and behavior problems.

NILS YNGVE WESSELL

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***Education for Maturity:*** John Walker Powell; Hermitage House, New York, 1949. 242 pp. $3.00.

The author believes that group study will enable the individual (and society) to achieve the maturity so necessary today. His method depends largely on the acquisition of facts, and psychological insights are utilized only when compatible with his formula. The presentation is more fervent than objective but the parish minister can glean many useful ideas.

ROLLIN J. FAIRBANKS

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***Adolescence:*** C. M. Fleming; International University Press, New York, 1949. 243 pp. $4.50.

After mentioning the various meanings of the term adolescent, the author proceeds to describe the condition and growth of young people at home, at school, and on the threshold of maturity. He believes that recent findings from the fields of "Anthropology, Physiology, Medicine, Psychometrics, and Sociometry" throw important light upon the proper handling of this sub-maturity group. The gist of the book, however, should be fairly common knowledge to trained workers in the field of pastoral care. There are extensive bibliographies at the end of each chapter and some complicated diagrams in the text which might be of some help to the specialist in this field.

FREDERICK B. KELLOGG

●

***But You Don't Understand:*** Frances Bruce Strain; Appleton-Century-Crofts, 1950. 217 pp. $3.00.

The author proceeds directly to cases bringing to light "teen age predicaments." Twelve stories, presenting typical emotional crises of the high school boy and girl, are interestingly told in the vernacular of that age. In the latter part of the book "Suggested Interpretations of the Stories" are given.

The sketchy portrayals are in danger of leading parents to a misunderstanding of superficially similar but quite different situations having other roots. The average teen-ager will find the stories engrossing, increasing both understanding of himself and his capacity for tolerance and friendship. Because every narrative has a happy outcome, brought about by a greater comprehension on the part of almost all those intimately concerned, the disturbed boy or girl reader (whose adult associates are incapable of — or refuse to — develop sufficient insight to

be of help) may resort to undesirable resentment and self-pity. The reviewer, however, has used this book with some success as a basis for young people's group discussion.

CHARLES M. STYRON

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***Freud: Dictionary of Psychoanalysis:*** Nandor Fodor and Frank Gaynor; Philosophical Library, New York, 1950. 208 pp. $3.75.

The title of this volume rather aptly describes its contents. It is basically just what the blurb says it is: "A complete glossary of all the basic terms in psychoanalysis as defined and explained in the words of Dr. Sigmund Freud, founder of the school of psychoanalysis."

The student of psychoanalysis, especially orthodox psychoanalysis, and anyone working in an associated field that uses some of the exceedingly obscure terminology, so much a part of this specialty of medicine, will no doubt find this little book of marked help. It is very doubtful that many laymen will find much use for it, nor that clergymen will have occasion to refer to it.

ERNEST E. BRUDER

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***Essays on a Science of Mythology:*** C. G. Jung and C. Kerenyi; Pantheon Books, New York, 1950. 289 pp. $4.00.

The authors have pooled their special talents and backgrounds to give a most detailed and illuminating study of two cycles of myth, that of the Divine Child and the Kore (Hecate, Demeter, Persephone, etc.). In so doing, they have brought into greater clarity not only the snarled and puzzling problem of the origin, function, and nature of the myth itself but the even more complicated and complex question of the archetype.

It is primarily a book for specialists, but anyone interested in myth, mysticism, folk religion, the relationship between a culture and its body of beliefs, and the deep dynamisms of the human psyche will find it a valuable reference.

INA MAY GREER

•

***Religion and the Cure of Souls in Jung's Psychology:*** Hans Schaer; Pantheon Books, New York, 1950. 221 pp. $3.50.

Not the least important of Dr. Schaer's contributions to psychology, religion, and the cure of souls contained in his close-packed study of Jung's psychology is the challenge given the reader to scrutinize his *own* definitions and, if he is reading carefully and with full awareness of the import of the formulations presented him, to rethink for himself the exact meaning of the great Christian symbols and dogmas. Frequently he may find himself in complete disagreement with both Dr. Schaer and Dr. Jung. That very disagreement may serve to sharpen his own insights and broaden his understanding of the great truths to which he adheres.

Perhaps the chief value of the study is that at last it is now possible to secure within the covers of one book some idea of Dr. Jung's position and the concept he holds of the role of religion in the life of the modern man.

INA MAY GREER

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***Letters to Young Churches:*** J. B. Phillips; Macmillan, New York, 1950. 230 pp. $2.75.

Often the parishioner speaks wistfully of his inability to find help in the Bible. Not simply the format, typography and cross-references confuse him, but the vocabulary and the frames of reference are unfamiliar. This admittedly free translation of the Pauline epistles (plus those of James, Peter, John, and Jude) is in many ways an answered prayer. The famous epistles now read like actual letters and contain a fascination seldom associated with Scripture. The subtitles aid greatly, and the marginal verse-numbers facilitate locating desired passages. Once this book has been examined, its purchase is a foregone conclusion.

ROLLIN J. FAIRBANKS

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***Here I Stand:*** Roland Bainton; Abingdon-Cokesbury, 1950. 386 pp. $4.00.

At first thought, one might wonder why a life of Luther should be reviewed in a Pastoral Journal. To read the book is to understand why. To this reviewer *Here I Stand* is a must.

Clinical experience and the daily facing of pastoral relationships inevitably confront a person with the deepest questions of life — questions about man and about God. Through Bainton's life of Luther, one feels that he comes to know Luther as a living person. He identifies with him as a man who bravely and sometimes recklessly faces life, and does something about it even when he is not sure what he should do. Luther, like Paul and many a would-be understanding and non-legalistic pastor, was accused of encouraging sin. He saw freedom abused and he wrestled within his own conscience about what it meant. These and numerous other of our daily concerns are dealt with in a most penetrating way in this book. The chapters, No Other Foundation, The School for Character, and The Struggle for Faith, are alone worth the price of the book.

The quantity of research which has gone into the writing of this book is fabulous. It is quite evident that Bainton ate, drank, and slept Luther for months, if not years. The author's style is as delightful and easy in this book as in his other masterpiece, *The Church of Our Fathers.* Most of us will not get around to reading the actual works of Luther, but we can come to know him better by reading *Here I Stand.*

DON C. SHAW

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***Kierkegaard: The Melancholy Dane:*** H. V. Martin; Philosophical Library, New York, 1951. 119 pp. $3.00.

Pastoral theology today cannot afford to overlook the contributions of Soren Kierkegaard, the Danish theologian of the last century. He anticipated many

of the basic questions which confront psychologists and religionists alike. In this book, the author has sought to condense and clarify most of Kierkegaard's important writings. It is a tremendous and responsible assignment to undertake, and it is inevitable that it be influenced by the author's own needs. A sympathetic sketch of the "Melancholy" Dane's life is included as well as an evaluation of the permanent worth of his contributions. The "Index of Subjects" leaves much to be desired.

ROLLIN J. FAIRBANKS

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***Bristow Rogers: American Negro:*** Else P. Hillpern, Irving A. Spaulding, Edmund P. Hillpern; Hermitage Press, New York, 1949. 184 pp. $3.00.

This is not "a psychoanalytical case history" as is reported on the jacket. It is the account of a man being honest with himself and his feelings, and writing these out as they come to him during the intervals between analytic sessions. Here we have the frank statement of what an individual feels when he tries to deal with his immature and unresolved strivings. Such honest writing is both informative and commendable. However, it is not easy nor pleasant to read!

The opening chapter which presents the "study" gives some extremely helpful data relative to analytic therapy and research dealing with "marginal man" on society's periphery. The comments of the editor are as often confusing as illuminating to the average reader. On the whole, the material in the book could be much more helpfully presented, and inasmuch as the "analysis" was still going on at the end of the volume, the reader may wonder how it all turned out.

ERNEST E. BRUDER

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***The Religion of Dr. Trudeau:*** James Arthur Muller; Dept. Social Service, One Joy Street, Boston, 1948. 28 pp. $.25.

This small booklet, written from the heart by one who loved and appreciated Dr. Trudeau, will be of great benefit to many people. It ought to be placed in the hands of doctors and nurses who will learn from it the rich contribution of the Christian faith and its insights into their work. It contains, from deep experience with many sad cases, profound wisdom about human suffering. All who read it will inevitably want to quote from it. Dr. Trudeau considered it one of the privileges of his life to prepare people for suffering and death. Since every pastor does this, he will want it; and since all men suffer and die, the booklet contains wisdom for us all.

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***How To Solve Your Problems:*** R. H. Seashore and A. C. Van Dusen; Science Research Associates, Chicago, 1950. 48 pp. $.60.

This pamphlet is the twenty-fourth in a series written especially for young people and as a counseling aid to teachers and parents. Its thesis is that problems are occasions for maturing experiences, and it aims to present a six-step method by which a person may constructively meet his day-to-day hurdles.

Although recognizing that some human problems are beyond individual solution, the authors stress the capability of individuals to meet their daily problems by constructive thinking and action.

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***A Greater Generation:*** Ernest M. Ligon; Macmillan, New York, 1948. 157 pp. $2.75.

Dr. Ligon, in short, concise chapters, gives the "laws" of character development both from scientific and religious viewpoints. His basic conviction is that "what needs to be done can be done." His main authority is Jesus. The parish minister will find this book stimulating.

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***How Religion Helps:*** Albert W. Palmer; Macmillan, New York, 1949. 57 pp. $1.50.

This small book was written for those who are trying to get well. It discusses ways in which religion helps during illness and offers prayers and meditations for individual use. Pastors will find helpful suggestions for their own calling on the sick, and patients, simple devotional material.

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***My Faith Looks Up:*** Russell L. Dicks; Westminster, Philadelphia, 1949. 96 pp. $1.50.

This is the first in a series of "pastoral aid books". The author writes in his usual positive and directive style. The avowed purpose of the book is to help the reader reduce his emotional tensions. The pastor can safely recommend or loan this book to any intelligent person who is really wanting release from fear, worry, guilt, anxiety or loneliness, and he may expect that the reader will get some help and guidance along the path toward wholeness of life.

The poetic meditations on the Psalms, the Lord's Prayer, the directions for relaxation, and the list of things suffering teaches us form the most valuable parts of the book.

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***Not Death at All:*** Norman Vincent Peale; Prentice-Hall, New York, 1949. 22 pp. $1.00.

This is not a new book from the prolific pen of Mr. Peale, but a chapter from his earlier work, *A Guide to Confident Living*. The presentation is exhortative, anecdotal, and sentimental. It may conceivably prove useful to those who are wavering on the edge of faith, fearful of tumbling off into the abyss of disbelief. There are others, however, who in their mature years have never known a religious faith and for whom this message may mean little more than "sweetness and light." They will rightly resent the totally repressive implications and methods that this extract shares with its parent work: we must turn our backs on bitterness and hate and emphasize the positive. There *is* (as William James pointed out) an "expulsive power of a new affection," but this expulsion can be accelerated by acknowledging our destructive feelings rather than by ignoring them.

***Happy Marriage Is for You—If . . .:*** Carl Kardatzke; The Warner Press, Anderson, Indiana, 1947. 31 pp.

This booklet is "for young people of senior high school age or older" and can be enthusiastically recommended to ministers, directors of religious education, and youth leaders generally. Characterized by directness and brevity, the theme of the pamphlet is that "marriage is worth preparing for, more so than for anything else in the world."

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***How to Tell Your Child About Sex:*** James L. Hymes, Jr.; #149 of the Public Affairs Pamphlet Series, New York, 1949. 31 pp.

This is an excellent handbook for anyone looking for the answer to the title question. Besides being sound and thorough, it is immensely reassuring the to uncertain parent. A good bibliography is included.

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***The Church and Problems in Family Living:*** T. B. Maston; Potter's Book Store, 4404 Frazier, Fort Worth, Texas. 1948. 119 pp.

This book is a syllabus prepared for students in Southern Baptist Theological Seminary. Its purpose is to increase their knowledge of resources for personal and group counseling and to encourage them to improve their techniques for helping people with problems in family living.

It has two features to recommend it to parish clergy: an exhaustive, informative and documented listing of the teachings of the Bible and the Church concerning the family; and a bibliography of some 825 books and pamphlets, both standard and current in the field. In between is a vast amount of case material used to illustrate elementary methods of dealing with people and their family problems.

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***Into the Streets and Lanes:*** Thomas C. Marshall; Saunders Press, Claremont, Calif., 1948. 178 pp. $3.00.

Described correctly as "the beginnings and growth of the social work of the Episcopal Church in the Diocese of Los Angeles," this book belongs primarily in diocesan archives. With due respect for the pioneers in church-related social work, the fact remains that a social service which relies solely on religious inspiration does not usually achieve the quality of social rehabilitation frequently characteristic of secular social work. It is an important function of the Church to experiment, explore and pioneer — particularly in the field of social problems. That this responsibility was vigorously undertaken by the Diocese of Los Angeles is corroborated by this book.

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***Episcopal Social Welfare Today:*** Arnold Purdie; The National Council, Protestant Episcopal Church, New York, 1949. 35 pp. $.25.

This pamphlet, written in popular language and attractively illustrated with pencil sketches, succeeds in making clear what the Episcopal Church is doing in

the fields of child care, homes for the aged, hospitals, city missions and chaplaincy work, and group work agencies.

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***Christian Marriage:*** G. Douglas Krumbhaar, M.D.; Department of Social Service, Protestant Episcopal Church, Boston, 1948. 16 pp.

A distinguished doctor and Episcopal layman has written this pamphlet for those contemplating marriage. It is thoughtful, honest, and inspiring. The pastor might do well to have copies on hand to give to young couples who come to him either before or after their marriage. It will prove equally helpful to young people in their late teens, serving to orient them in this critical area.

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***Authority and the Individual:*** Bertrand Russell; Simon and Schuster, New York, 1949. 79 pp. $2.00.

Bertrand Russell's analysis and solution of a perennial human problem, how to combine social stability with individual creativity, authority with freedom, is contained in this book. It is understood that the key lies in an accurate appraisal of the needs and impulses of human nature. Such an appraisal is here attempted but on a level which is superficial even within the framework of naturalism. The author manages to preserve "certain high hopes for the not too distant future of mankind." They will be realized if government control is restricted to matters of security, justice, and conservation.

## OUR REVIEWERS

*Seward Hiltner* is now an Associate Professor at the Chicago Theological Seminary . . . *Paul E. Johnson* is Professor of Psychology of Religion at Boston University School of Theology . . . *Rollin J. Fairbanks* is Director of the Pastoral Counseling Center in Boston and teaches at Harvard and at the Episcopal Theological School . . . *Paul B. Maves* is a member of the faculty at Drew Theological Seminary . . . *Don C. Shaw* is Chaplain at the District of Columbia Penal Institutions and a member of our Editorial Board . . . *G. Douglas Krumbhaar* is a Boston obstetrician and gynecologist . . . *Nils Yngve Wessell* is Dean of the School of Liberal Arts at Tufts College . . . *Frederick B. Kellogg* is Chaplain to Episcopal students at Harvard and Radcliffe . . . *Charles M. Styron* is pastor of The First Parish Church in Lincoln, Massachusetts, and a member of our Editorial Board . . . *Ernest E. Bruder* is Chaplain at St. Elizabeths Hospital in Washington and our Editor-in-chief . . . *Ina May Greer* is a psychiatric research associate in Boston.

While we do not identify those who have written our book notices, we do wish to express our gratitude for their contributions.

# NOTES AND COMMENTS

In merging *The Journal of Clinical Pastoral Work* with this *Journal* there has been some confusion in our combined mailing lists with the result that several copies have gone to the same address. Your patience with us will be appreciated.

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The Board of Governors of the Institute of Pastoral Care is recommending to its membership at the annual meeting the election of Chaplain James H. Burns as Executive Secretary. This would relieve the present Executive Director, Rollin J. Fairbanks, of administrative duties so that he can devote his time to problems of training and promotion.

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The Chaplains' Association of the American Protestant Hospital Association will hold its annual meeting in conjunction with the annual A.P.H.A. convention March 1st and 2nd at the Congress Hotel, Chicago, Illinois. Chaplain John Billinsky, president of the Chaplains Association, is planning a program which will consider "Ministering to the Child Patient" and "Ministering through the Printed Word." Bishop G. Bromley Oxnam will be the speaker on the occasion of the annual banquet.

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The Institute of Pastoral Care has completed arrangements for two more training centers under its auspices. The first is Augustana Hospital in Chicago, under the direction of Chaplain Granger Westberg. The second is Emanuel Hospital in Portland, Oregon, and supervision will be given by Chaplain H. George Randolph. This latter hospital will be the first clinical pastoral training center on the west coast.

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The Hartford Seminary Foundation has established an Institute of Church Social Service under the direction of Dr. Charles G. Chakerian, to provide professional social service training within a Church frame of reference. The address is Hartford 5, Connecticut, and inquiries are invited.

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Ministerial groups desiring clinical material for study purposes can secure five marriage counseling cases, mimeographed, from the Family and Children's Service, 937 Willow Street, Lebanon, Pennsylvania. The cost is one dollar.

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Of great interest and usefulness to our readers should be the Federal Security Agency's *Catalog of Mental Health Pamphlets and Reprints* for 1950. The contents are intelligently arranged for maximum usefulness. Ministers, for instance, would find material of special interest to them under "Mental Health Information of Non-Psychiatric Professions: Ministers"; and under "Mental Health Guidance: Religion."Readers of the *Journal* will find something significant for them in all sections. Copies may be secured for 20 cents from the Superintendent of Documents, U. S. Government Printing office, Washington 25, D. C.

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Another useful list is that compiled by the National Council on Family Relations, publishers of *Marriage and Family Living*. This list covers helpful reprints, pamphlets, and papers which the N.C.F.R. has selected and makes available at cost.

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The Bureau of Publications, Teachers College, Columbia University, New York 27, has sent us an announcement of the pamphlets in the Parent-Teacher Series, edited by Ruth Cunningham. Readers of *The New York Times* Sunday magazine will remember references to them over the past weeks. The announcement and order-form may be secured by writing the Bureau.

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